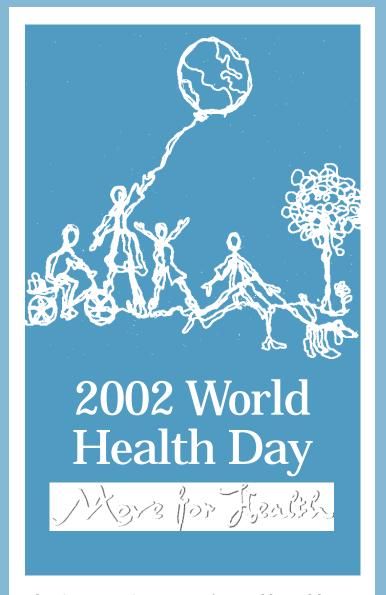


World Health Day

April 7, 2002



The American Association for World Health was founded in 1953 as a private, nonprofit charitable and educational organization, and works in concert with the World Health Organization and the Pan American Health Organization. Its purposes are to inform the American public about major health challenges that affect people here and abroad, and to promote cooperative solutions that emphasize grassroots involvement.

American Association for World Health

1825 K Street, NW, Suite 1208 Washington, DC 20006

World Health Day

Move for Health

The benefits of regular physical activity are far reaching. Regular physical activity provides individuals with:

- Increased vitality and energy
- Stronger bones and muscles
- Improved immune system
- Delayed onset or prevention of chronic disease
- Delayed decline in motor performance
- Weight control
- · Reduced stress, anxiety, and depression
- Greater opportunities to meet and interact with others
- Prolonged ability for independent living among older adults

Unfortunately, in the United States more than 60% of adults do not achieve the recommended amount of regular physical activity and 25% of adults are not active at all. Many Americans live and work in areas that do not offer many opportunities for regular physical activity. Some live in neighborhoods where they feel unsafe. Advancements in technology have also resulted in less movement.

Many busy Americans eat at fast food restaurants. They are entertained by cable television and video games, and can do just about anything on their computers. With great increases in the incidence of cardiovascular disease, cancer, diabetes and obesity, these conveniences may come at a great cost.

Some Alarming Statistics: United States

- 13.5 million people have coronary heart disease (CHD)
- 1.5 million people suffer from a heart attack in a given year
- 8 million people have type II diabetes mellitus
- 95,000 people are diagnosed with colon cancer each year
- 250,000 people suffer from hip fractures each year
- 50 million people have high blood pressure
- Over 60 million people are overweight

A shift in perspective is necessary to get people moving. "Move for Health" challenges individuals to find activities that they enjoy and incorporate them into their daily lives. Community leaders also need to develop innovative ways of drawing people into physical activity. Tackling inactivity with multicomponent interventions will confront the challenge most effectively. Together, we need to raise awareness about the benefits of physical activity, collaborate with government officials to change laws and policies that deal with access and work to create environments that are more conducive to a physically active lifestyle.

Previous interventions have been fragmented and have not achieved long-term success. We want to deliver the message that physical activity can be fun, inexpensive and easy; and that anything involving movement, even if it isn't vigorous, creates great benefits.

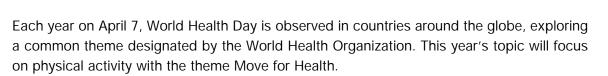
What Is World Health Day?

World Health Day is celebrated each year on April 7 in the 191 member countries of the World Health Organization (WHO). WHO established this important observance to provide a forum for discussion regarding various health challenges worldwide. On a national level, the American Association for World Health, in cooperation with the World Health Organization, its Western Hemisphere affiliate the Pan American Health Organization (PAHO), and the U.S. Department of Health and Human Services (USDHHS), coordinates activities for World Health Day. Each year, a new focus is selected for World Health Day to highlight a public health issue of global concern. Previous topics have included Injuries and Violence, Oral Health, Immunization, Healthy Communities, Emerging Infectious Diseases, Safe Motherhood, Healthy Aging, Blood Safety and Adequacy and Mental Health.

The Target Audience

The activities surrounding World Health Day are widespread and are used to create awareness among the general public. The target audience for this initiative stretches far beyond the health sector to include community leaders, educators, students, families, and the faith based community. Within the health sector, the topic targets health professionals such as physicians, nurses, patients, nutritionists, health ministers, health insurers, charities and other volunteer organizations. The media is also included in our target audience to assist in raising awareness among the general public about the positive change we strive to achieve.





Here in the United States, the American Association for World Health, in partnership with the Pan American Health Organization and key agencies within the U.S. Department of Health and Human Services, worked with a prestigious national World Health Day Advisory Committee to help shape our national focus for the World Health Day initiative.

This year's theme challenges people to incorporate physical activity into their daily lives. Physical activity can be as simple as using the stairs instead of an elevator or walking to the store instead of driving. Physical activity can be fun, easy and inexpensive. It doesn't require a gym membership or equipment. Instead, it is simply about getting moving, any way you can.

The key to the success of this initiative lies within local communities in every city and state. Community groups and individuals have the power to help their friends and neighbors adopt healthier behaviors. They can create coalitions between the health community and environmental organizations, educational groups, the faith community, government agencies, foundations, elected officials and others in order to address what they as a group can do to ensure more physical activity-friendly environments and neighborhoods. Collaborative efforts to pool diverse resources at the local level are the best way to get people moving for health. Change is more likely to be successful and sustainable if the people it affects are involved in initiating and promoting the change.

Move for Health is an initiative that everyone can be part of. It benefits everyone. Frequent physical activity reduces the incidence of numerous chronic diseases and the occurrence of depression, stress and anxiety. In addition to such physiological benefits, there are social benefits of interacting with others and economic benefits of reducing health care costs and lost productivity that allow the advantages of being active to transcend to each citizen.

If we work together, every community can move for health. All that is required is commitment and vision to set in motion a process of long-term change that benefits all citizens.

We hope this resource booklet will assist you in your efforts to help address the challenges of physical inactivity in your sphere of influence. The lives of countless individuals will be improved significantly when the importance of regular physical activity is more widely integrated into our day-to-day lives.

> Richard L. Wittenberg President and Chief Executive Officer American Association for World Health





THE SECRETARY OF HEALTH AND HUMAN SERVICES WASHINGTON, D.C. 20201

This year, the theme "Move for Health" has been chosen for World Health Day 2002, to stress the importance of physical activity and movement for disease prevention and overall good health. As the 191 member countries of the World Health Organization observe World Health Day on April 7, 2002, our memories of September 11 are still fresh and painful. In these times of uncertainty and fear, when many wonder – "What can I do to protect myself and my family?" – there is an answer: we can promote safe, supportive communities; we can work with our neighbors to become more physically active; we can get the world moving for health.

The catastrophes of September 11 and their aftermath should not be minimized. But let us consider for a moment these sobering statistics: in the United States alone, an average of 25,000 people per month — that's 300,000 each year — die from diseases related to inactivity. Sixty percent of global deaths each year are related to physical inactivity. If all inactive adults in the United States had been active in the year 2000, the potential savings that year would add up to \$75 billion.

As the world becomes more urbanized, affluent and motorized, the diseases of inactivity will afflict a growing number of people. A sedentary lifestyle poses health risks for people of all ages, races, and ethnicities, for men and women alike. Research shows that only four in ten adults in the United States meet recommended levels of physical activity. Inactivity is a major challenge among women, the elderly, and racial and ethnic minority groups.

We must work together to reverse these alarming trends. A growing body of scientific evidence consistently shows the health benefits of an active lifestyle. Research studies conducted both in and out of government show that significant health benefits are gained by moderate amounts of daily physical activity. For children, 60 minutes a day, including active play, is recommended; for youth in middle school and high school as well as for adults, including seniors and people with disabilities, a minimum of 30 minutes of daily moderate physical activity, such as brisk walking and climbing stairs, produces great health benefits.

To be physically active you do not have to be an avid athlete or work out strenuously in a gym to gain the health benefits of regular activity. Although vigorous physical activities, such as sports and structured exercise, offer added health benefits, walking, cleaning the house, digging in the garden and other ordinary activities, done for 30 minutes a day, can greatly improve health.

We may not have control over such terrible tragedies as those of the past months, but people the world over do have it in their power today to create longer, healthier, happier lives. There has never been a more crucial time to improve world health by encouraging, motivating, and enabling all people to practice an active lifestyle. I strongly believe that by working together on the local, state, national, and international levels we can make great strides toward reducing the number of preventable deaths and improving global health.

TOMMY G. THOMPSON

World Health Day

ACKNOWLEDGEMENTS

American Association for World Health

President Jimmy Carter, Honorary Chairman Herman Ellis, MD, MPH, Chairman of the Board Richard L. Wittenberg, President/Chief Executive Officer Jill Boezwinkle, Project Coordinator Amy Brady, Project Associate Leia Gerali, Project Associate Vanessa Mitchell, Project Associate

Hirshorn Zuckerman Design Group, Inc., Cover/Poster Art — Layout/Design



World Health Day 2002 Advisory Committee

This initiative could not have been developed without the knowledge, time and energy of our advisory committee.

AARP
American Academy of Family Physicians
American Alliance for Health, Physical Education,
Recreation and Dance
American Cancer Society
American Medical Association
American Nurses Association
American Obesity Association
American Physical Therapy Association
American Public Health Association
Canadian Fitness and Lifestyle Research Institute

Canadian Fitness and Lifestyle Research Institute
Centers for Disease Control and Prevention
Health Resources and Service Administration

Local Government Commission

National Association of County and City Health

Officials

National Coalition for Promoting Physical Activity

National Collegiate Athletic Association National Conference of State Legislatures

National Education Association Health Information

Network

National Heart, Lung, and Blood Institute National Institute of Child Health and Human

Development

National Institute of Diabetes and Digestive and

Kidney Diseases

National Institute of Mental Health

National Institute on Aging

National Latina Health Network

Office of Minority Health Office of the Surgeon General

Pan American Health Organization

President's Council on Physical Fitness and Sports

Rails-To-Trails Conservancy Special Olympics, Inc.

Sporting Goods Manufacturers Association

United States Conference of Mayors

United States Department of Health and Human

Services

United States Environmental Protection Agency

United States Olympic Committee

World Health Organization

Thanks to the Following for Making The World Health Day 2002 Initiative Possible

Support provided by the U.S. Department of Health and Human Services including:

Health Resources and Services Administration Centers for Disease Control and Prevention

National Institute of Mental Health

National Institute of Child Health and Human

Development

AAWH Supporting Members

Automated Health Systems, Inc., Pittsburgh, PA Cedars-Sinai Medical Center, Los Angeles, CA ORC Macro International, Calverton, MD St. George's University School of Medicine, Grenada, West Indies

Wyeth Pharmaceuticals, St. Davids, PA

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World Health Day

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Health Around the World

Estimates show that 60-85% of the world population is not physically active enough to derive health benefits, and women are especially inactive. This trend of inactivity is present mostly within urban regions of developing and industrialized countries, especially in low-income communities.

A major cause of cardiovascular diseases, diabetes and obesity is lack of physical activity. WHO estimates that inactivity leads to more than 2 million deaths per year.

A combination of improper diet, lack of physical activity and tobacco use is estimated to be the cause of up to 80% of cases of premature coronary heart disease. In countries as diverse as China, Finland and the United States, studies have shown that even relatively modest lifestyle changes are sufficient to prevent the development of almost 60% of type II diabetes cases. A high rate of obesity is found in many countries of Latin America, the Middle East, and Asia.

According to PAHO, in most Latin American and Caribbean countries the prevalence of overweight ranges from 30-65% among women and from 20-50% among men. Obesity among school-aged children is estimated at 25-30%. Few studies have been done on physical activity levels for children but the rates of inactivity may be as high as 50-90%.

Our neighbors in Canada have similar concerns. The Canadian government spends an average of \$580 million annually in treatment costs for heart disease alone.

Brisk walking, biking and dancing are only some ways to be active.

PHYSICAL ACTIVITY Q & A

What do you mean by physical activity?

Physical activity is any body movement that results in an expenditure of energy (burning calories). Simply put, moving! When you walk briskly, play, skate, clean house, dance or climb stairs, you are moving for health.

Is little activity really a global public health problem? Aren't there more important health priorities, especially in poor countries?

The lack of physical activity is a major underlying cause of death, disease and disability. Preliminary data from a WHO study on risk factors suggest that a sedentary lifestyle is one of the 10 leading global causes of death and disability. In many rapidly growing cities, crowding, poverty, crime, traffic, poor air quality and a lack of parks, sidewalks, sports and recreation facilities and other safe areas make physical activity a difficult choice.

Lack of physical activity means that many countries that are already struggling to manage the impact of infectious diseases and other development challenges will be forced to spend their meager resources dealing with noncommunicable diseases.

What can I do?

Physical activity is fun, free and easy, and virtually anyone can do it.

Brisk walking, biking and dancing are only some ways to be active. Try doing some simple stretches at your desk or walk, run or bike to places you would normally reach by bus, train or car. Many activities can be done in the home: for example, wash the windows, paint the walls, vacuum or sweep, rake the yard, cut the grass or walk the dog. Your goal is to be active for at least 30 minutes over the course of the day.





Health in the United States

The United States is facing a major public health challenge. The number of overweight and obese people is increasing at an alarming rate, and the current level of physical activity is far below the recommended amount. This lack of physical activity is directly related to the millions of cases of noncommunicable diseases that occur in our country each year. People are unaware of the importance of physical activity, or they are unable or unmotivated to fit physical activity into their daily lives.

The level of physical activity among adults in the United States remained constant from 1990-1998. A report conducted by the Centers for Disease Control and Prevention (CDC) indicated that only 4 in 10 adults in the United States meet the recommended levels of physical activity. It is evident that most Americans are not moving enough and have not been for quite some time.

In fact, the national rates for participation in leisuretime physical activity are continuously low for women, older adults and racial and ethnic minority groups. These high-risk populations face numerous barriers that may affect their levels of physical activity.

Support is greatly needed in order for levels of physical activity to increase within the United States. Individuals must recognize the numerous benefits of becoming and remaining physically active. The environment people live in has a significant impact on the success of such an important behavior change. Those choosing to be more physically active may find the transition easier with the support of local groups, organizations, the community and their environment.

Inactivity is a major concern to all groups in the United States, including children and adolescents, men and women, older adults, people with mental health illnesses, people with disabilities, minority groups and those who are obese. Regardless of one's gender, age and physical or mental health, physical activity can greatly enhance the quality of life.

PEOPLE AFFECTED BY INACTIVITY

Children & Adolescents

America's children are less active than ever. Statistics reveal that:

- In 1999, 43% of students in grades 9-12 viewed television more than 2 hours per day.
- 30% of children and adolescents are eating more saturated fat and less fruits and vegetables than recommended.

The combination of lack of physical activity and poor diet explain why 13% of children aged 6-11 are overweight.

The Surgeon General recommends 30 minutes of moderate intensity physical activity most, or preferably all, days of the week for all persons. The National Association for Sports and Physical Education encourages elementary school children to receive at least 60 minutes daily.

It is critical for children to learn good health habits while they are still young so they will be more likely to carry them into adulthood.

Since school is such a large part of a child's life, school-based programs to promote physical activity would be the most effective. Programs should:

- Raise awareness and provide knowledge about physical activity
- Establish supportive social and physical environments
- Teach students how to increase their motivation
- Enforce supportive policies

Incorporating these programs into schools will play a key role in getting children moving.

Adolescents' lack of physical activity also places them at high risk.

- 14% of adolescents age 12-19 are overweight.
- Nearly half of adolescents (age 12-21) are not vigorously active on a regular basis.
- Only 25% of students take physical education classes daily and 25% do not attend any school physical education at all.
- Daily attendance in physical education classes has declined from approximately 42% in 1991 to 25% in 1995.

Participation in all types of physical activity decreases strikingly as age or grade in school increases. Many school districts across the United States do not require their students to participate in physical education classes.

In order to reverse the trend of inactivity among adolescents, innovative programs need to be developed. Some of the ways that schools can increase physical activity are:

- Increase resources to establish more school-based programs that teach lifetime physical activities such as dancing classes, mountain biking, and skiing.
- Incorporate background information on the activity.
- Explain the benefits of and provide basic training in physical activity.

Children and adolescents can benefit from regular physical activity in terms of improved muscular strength, enhanced skeletal health, higher levels of physical fitness, improvements in self-esteem and reduction of depressive symptoms, anxiety and stress. This often leads to greater academic achievements as well.

Percentage of Physical Activity Among Adolescent Students in Grades 9-12 by gender, race/ethnicity, 1999

Female				
Activity Type	Total	White Non-Hispanic	Black Non-Hispanic	Hispanic
Virgorous*	57.1	59.7	47.2	49.5
Moderate**	24.4	25.8	17.8	16.7
Strengthening***	43.6	45.9	33.1	38.8

Male				
Activity Type	Total	White Non-Hispanic	Black Non-Hispanic	Hispanic
Virgorous*	72.3	74.6	64.6	71.6
Moderate**	29.0	31.7	24.3	26.1
Strengthening***	63.5	64.8	57.9	66.4

- * Activities that caused sweating and hard breathing for 20 or more minutes on 3 or more of the 7 days preceding the survey.
- ** Activities that did not cause sweating and hard breathing for 20 or more minutes on 3 or more of the 7 days preceding the survey.
- *** For example, push-ups, sit-ups or weight lifting on 3 or more of the 7 days preceding the survey

Source: Kann L, Kinchen S, Williams B, Ross L, Lowry R, Grunbaum JA et al., Youth Risk Behavior Surveillance United States 1999. MMWR 2000; 49 (SS05): 1-96

Men and Women

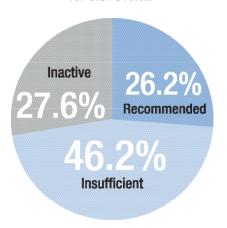
Data collected reveals that most of today's adults are inactive.

- 60% of adults do not engage in levels of physical activity necessary to provide health benefits.
- 25% of adults are not active at all in their leisure time.
- Women are less likely to engage in physical activity than men.
- African Americans and Latinos are less likely to be physically active than Caucasians.

Regular activity is just as important for adults as it is for children, with adults receiving the following added benefits:

- Decreased risk of cardiovascular disease, diabetes and certain forms of cancer
- Reduced joint swelling and pain associated with arthritis
- Improved mental health and weight management
- In women, enhanced effect of estrogen replacement therapy and decreased bone loss after menopause

Physical Activity Levels for U.S. Overall



Older Adults

It is estimated that almost 16% of the population in the United States is over the age of 60. This is the result of aging baby boomers, new breakthroughs in medicine and advances in medical technology that help people live longer.

A vast number of seniors are inactive by age 75. One in three men and one in two women do not engage in physical activity.

Regular physical activity provides numerous health benefits for seniors including:

- · Reducing the risk of coronary heart disease and developing high blood pressure, colon cancer and diabetes
- Creating a positive mental outlook and feelings of well-being
- Increasing mobility
- Maintaining healthy bones, joints and muscles

These benefits can be enjoyed whenever one becomes more physically active.

Many different activities can improve the health and independence of older adults, from walking to athome activities that can be performed while seated.

The four most important physical activity considerations for older adults are:

- **Endurance** Strength
- Balance
- Flexibility

Endurance activities increase your breathing and heart rate. They improve the health of your heart, lungs and circulatory system. Endurance activities help you perform daily activities such as climbing stairs and grocery shopping.

An increase in muscle strength can make all the difference in your ability to be more independent such as the ability to get up from a chair or brush your teeth.

Balance is particularly important for older adults. Hospitals see nearly 300,000 older patients each year from hip fractures that were essentially the result of falls.

Balance can easily be practiced at home. For example, you could try using just one hand to support yourself while standing instead of using both. Eventually it may be possible to use only the fingertips or perhaps nothing at all. It is recommended that you have someone else supervising these activities to ensure that you do not fall.

Stretching also can help older adults become or remain self-sufficient. Even though stretching may be the only form of physical activity possible for some older adults, it can provide more freedom of movement to do the things that you enjoy.

The greatest benefit older adults can gain from these activities is increasing their chances of remaining independent and being able to care for themselves.

I feel my day isn't complete without some physical activity. I know I do miss it on the days that I don't do it.



Harriet Erickson, 72, Durham, NC

People with Mental Health Illnesses

Physical activity is associated with improved mental health and psychological well-being.

Although determining the independent effect of physical activity on mental health is difficult, studies have found that physical activity appears to improve the symptoms of:

- Depression
- Anxiety
- Panic disorder (to a lesser extent)

Generally, individuals who are inactive are twice as likely to suffer symptoms of depression as those who are active.

Physical activity also increases a person's:

- Perceived energy level
- Self-esteem
- Positive affect (positive disposition)

Long-term physical activity may have continuous psychological benefits. Yet many people who complete just one session of physical activity may see instant temporary improvements such as reduced anxiety levels and muscular tension. Some researchers have even suggested that if these short-term benefits are experienced periodically, they may act as an important preventative measure towards the maintenance of mental health over time.

Many studies regarding physical activity and mental health target only the effects of recreational aerobic

activities. However, it is vital to be aware that the type of physical activity and the setting in which it occurs have a great impact on mental health outcomes.

Encouraging activity among this population may improve health, physical ability, and self-esteem. These positive effects of physical activity are great reasons why people with mental health illnesses should become active.

People with Disabilities

An estimated 54 million individuals in the United States are currently living with disabilities. This is almost 20% of the population, and data indicate that the proportion is increasing. People with disabilities are less likely to engage in regular moderate physical activity. Yet they have similar needs to promote their health and prevent unnecessary disease. People who have activity limitations report more days of pain, depression, anxiety and sleeplessness and fewer days of vitality during the previous month than people not reporting limitations. These effects likely stem from environmental barriers that reduce the individual's ability to engage in activities, which undermines physical and emotional health. It is important for friends and family of people with disabilities to provide consistent and positive social support related to regular physical activity.

Communities can also help to ensure that programs meet the needs of disabled people by:

- Ensuring that the environment and facilities are conducive to the population
- Involving people with disabilities in the planning and implementing of community physical activity programs
- Ensuring that programs are suitable for disabled individuals of all ages

It is also estimated that 2.0-7.5 million Americans have mental retardation (MR). Strength and cardiovascular endurance levels for these individuals are lower than for the general population, while obesity levels are much higher. Over half of all people with MR have been classified as obese, with women being significantly affected. Most individuals with MR have extremely low levels of physical activity. These lower levels may be attributed to delayed physical development, reduced motivation, or limited opportunities to participate in physical activity programs. Individuals with MR must

be provided with opportunities for physical activity development. Motivation is key to success. One of the best motivators is attention from other adults, so buddy systems have been shown to be very effective.

Physical activity need not be strenuous to produce health benefits. However, people with disabilities should consult a physician before beginning a program of physical activity to which they are unaccustomed. The emphasis on moderate amounts of physical activity makes it possible to vary activities to meet individual needs, preferences, and life circumstances.

Minorities

Among high school students in 1999:

- 56% of African Americans reported regular physical activity compared with 67% of Caucasians
- 51% of Hispanics reported playing on team sports in and out of school compared with 57% of Caucasians

These statistics result from a number of contributing factors within communities with a large population of minorities. Some of these factors are:

- Lower socio-economic status
- Reduced number of physical activity opportunities
- Lack of resources

Establishing a physically active lifestyle in childhood and adolescence is particularly important for African Americans and Hispanics, because African American and Hispanic adults have an increased risk for diseases related to physical inactivity.

In order to give all Americans the opportunity and motivation needed to become more active, physical activity programs should be:

- Creative
- Culturally sensitive
- Linguistically appropriate

The cultural diversity of the United States makes it difficult to promote a single type of physical activity program. In order to reduce or eliminate health disparities in terms of physical activity, healthcare providers need to recognize these differences and tailor programs toward the needs of each community and individual.

AAWH World Health Day

2002

Why We Should Care



Obesity

Obesity is on the rise and is threatening the health of millions in the United States.

CDC reports:

- 61% of United States adults are currently overweight or obese.
- Two-thirds of Americans are trying to lose weight or keep from gaining weight.

Currently 27 states report that 15-19% of their population is obese, and 22 states report that more than 20% of their population is obese.

These are alarming numbers because obesity and physical inactivity contribute to increased risk of non-communicable diseases. Obesity affects men and women and all races and socioeconomic groups. According to the recently released Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity, overweight and obesity are particularly common among minority groups and those with a lower family income. Also, for all racial and ethnic groups combined, women of lower socioeconomic status are 50% more likely to be obese than women of higher socioeconomic status. Children and adolescents are also affected by obesity, which increases their chances of being obese adults. To combat this, parents need to reduce television time and encourage outdoor play.

In 2000 the total cost associated with obesity was estimated at almost \$117 billion.

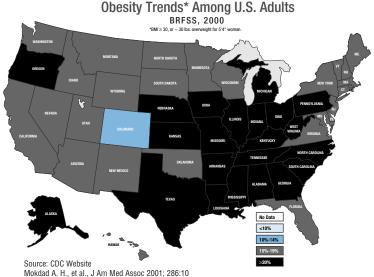
Research shows that this increase in obesity is not caused by genetics; thus, contributing factors to this epidemic are physical inactivity and poor nutrition.

In order to decrease obesity rates, communities must become involved.

- Workplaces must cooperate by providing more opportunities for employees to be physically active.
- Schools must offer more physical education with age appropriate activities.
- Parents must reduce their children's television and computer time in favor of outdoor play.
- States and local communities must create more open spaces to facilitate recreation and transport (playing fields, walking trails, biking paths, traffic lanes with features such as lights and crosswalks, etc).

Generally, it is critical that physical activity be restored to our daily routines.





11

TEN COMPONENTS OF PHYSICAL ACTIVITY Fact Sheet

1. ESTABLISH A MINIMUM PERSONAL ACTIVITY LEVEL

- Get 30 minutes of moderate-intensity activity on most, or preferably all, days of the week.
- Activities need not be continuous; they can be intermittent throughout the day.

2. DISCOVER YOUR PERSONAL BARRIERS AND WORK TO OVERCOME THEM

 Identifying and overcoming your barriers to physical activity are critical to being successful.

3. SET A PERSONAL PHYSICAL ACTIVITY GOAL AND STRIVE TO ACHIEVE IT

 Commit to fitting into your favorite jeans, building strength to play with grandchildren or increasing endurance to do a 5K walk.

4. CHECK WITH YOUR DOCTOR BEFORE GREATLY INCREASING THE AMOUNT OF YOUR PHYSICAL ACTIVITY

- Anyone planning to engage in a vigorous physical activity program is strongly urged to check with a doctor first as a precaution.
- If you have any health problems, use tobacco, or are a man over 40 or a woman over 50, check with your doctor as a precaution.

5. PRACTICE SAFETY PRECAUTIONS WHEN ENGAGING IN ACTIVITIES

- Ensure that the environment is well lit and safe.
- Stretch, warm up and wear appropriate clothes and shoes.
- Always wear a helmet when biking or rollerblading.
- Be aware of signs of overexertion (difficulty breathing, dizziness, excessive fatigue).
- Drink plenty of water.

6. FORM A GROUP AND MAKE IT MORE FUN

- Involve family members, friends and neighbors to socialize and sustain motivation.
- Involve children in active family activities and games such as hiking or playing tag.

7. KEEP YOURSELF MOTIVATED BY VARYING YOUR ACTIVITIES

 Try new activities or take up a new hobby such as gardening, dancing or yoga.

8. MAKE YOUR SCHOOL OR WORK ENVIRONMENT WORK FOR YOU

- Make stairways accessible to people as an alternative to using the elevator.
- Consider taking a longer lunch break, if possible, and using that time for physical activity.
- Try performing some relaxing stretches or deep breathing techniques at your desk.

9. MAKE YOUR HOME ENVIRONMENT WORK FOR YOU

- Perform physical activities (jumping jacks, jump rope, abdominal crunches, etc.) while watching television or during commercial breaks.
- Use readily available household products to build strength (soup cans for bicep curls and a box for stepping).
- Other suggestions: mow your lawn with a push mower, wash your dishes by hand once in a while, sweep or vacuum daily (e.g., bedrooms on Monday, living area on Tuesday, dining area on Wednesday, etc.).

10. HAVE FUN!

Why should I engage in physical activity?

Research has repeatedly shown that engaging in regular physical activity on most days of the week reduces the risk of developing or dying from the leading causes of illness and death in the United States. The hazards of inactivity are very clear. Insufficient physical activity is a serious nationwide problem. Its scope poses a major public health challenge to reduce the national burden of preventable illnesses and premature death.

Regular physical activity improves health in the following ways:

- Reduces the risk of dying prematurely
- Helps control weight
- Reduces the risk of dying from heart disease
- Helps control blood pressure
- Helps control blood cholesterol levels by increasing HDL cholesterol levels (good cholesterol)
- · Decreases the risk of developing diabetes
- · Helps control blood glucose levels for persons with diabetes
- Decreases the risk of developing colon cancer
- Decreases feelings of anxiety and depression
- Promotes psychological well-being
- Helps build and maintain healthy bones, joints and muscles and prevents osteoporosis
- Helps older adults become stronger and better able to move about without falling
- Improves blood circulation throughout the body
- · Improves the body's ability to use oxygen and provide energy for movement
- · Can help smokers cut down or even stop smoking

Economic Benefits

It has been shown that Americans who engage in regular physical activity save an average of \$500 annually in medical costs compared with those who are inactive. The potential savings if all inactive adults became physically active could have reached upwards of \$75 billion in 2000! Worksite programs that promote physical activity are beneficial to both the employer and the employee because economic benefits are derived from fewer sick days, lower medical costs, and increased productivity and job satisfaction.

Social and Family Benefits

Physical activity is a healthy and fun way to meet people or socialize with old friends. Whichever activities you prefer, you are sure to meet others who share your interests. Friends can be active and socialize at the same time by going on walks together. Or they could join a walking group and meet new friends. For a family, physical activity can be a great way to spend quality time together while setting a healthy example for children. The healthier you are, the more energy you will have for the people closest to you.

RECOMMENDATION FROM THE SURGEON GENERAL:

30 minutes of moderate

intensity physical activity on most, or preferably all, days of the week.

Some tips to improve your physical activity:

- Park your car at the far end of the parking lot and walk.
- Try entering malls away from the destination you wish to visit or make a habit of walking the mall before you begin shopping.
- Take the stairs whenever possible. Even if you work on the 60th floor, take the elevator just shy of your floor and walk the rest of the way.
- Hand-deliver messages rather than using the phone, inter-office mail or e-mail.
- Wash your car instead of using the car wash.
- Take your dog for a walk.
- Don't use the remote control. Get up and change the TV channel.
- · Begin a new hobby that incorporates activity, such as gardening or dancing.

Please refer to the Motivate and Educate section for more ideas on how to include physical activity in your daily life.

WH World Health Day 2002 Move for Health

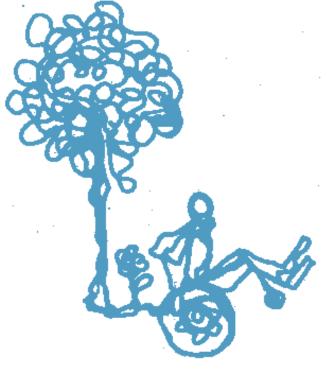
Perceived Exertion

The intensity of physical activity can be determined by the perceived amount of exertion. The Borg Rating of Perceived Exertion Scale ranges from 6 to 20. Individuals base their perceived exertion on the physiological sensations they experience during physical activity, including increased heart rate, increased respiration or breathing, increased sweating and muscle fatigue. Most vigorous activities will be between 13 and 15. Most individuals should not be at a very hard level (17) unless they are used to more vigorous forms of physical activity and are involved in regular conditioning.

	LEAST EFFORT
6	No exertion at all
7	
8	Extremely light
9	
10	
11	Light
12	
13	Somewhat hard
14	
15	Hard
16	
17	Very hard
18	
19	Extremely hard
20	Maximal exertion
	MAXIMUM

The following are examples of moderate activities, from less vigorous activities that take more time to those that are more vigorous and take less time.

Washing and waxing a car	45-60minutes
Washing windows or floors	45-60minutes
Gardening	30-45minutes
Wheeling self in wheelchair	30-40minutes
Walking 1 3/4 miles	35minutes
Raking leaves	30minutes
Bicycling 5 miles	30minutes
Dancing fast	30minutes
Water aerobics	30minutes
Pushing a stroller 1 1/2 miles	30minutes
Swimming laps	20minutes
Playing basketball	15-20minutes
Shoveling snow	15minutes
Jumping rope	15minutes
Running 1 1/2 miles	15minutes
Stair walking	15minutes



14

MAINTENANCE

Individual has been successful in performing behavior change for more than six months.

ACTION

Individual is consistent with behavior change but engaged in it fewer than six months.

PREPARATION

Individual plans to begin behavior change within the next month.

CONTEMPLATION

Individual is thinking about adopting the behavior change within the next six months.

PRECONTEMPLATION

Individual has no desire to perform the behavior change and has no future intentions of doing it.

Stages of Change Model

Selecting an audience for a program can be done using the Stages of Change Model. The model describes how people advance through a series of stages toward the goal of adopting a healthy behavior. The continuum begins with precontemplation and moves to contemplation, preparation, action and maintenance. Research has repeatedly shown that individuals who try to move too quickly through the stages are setting themselves up for failure.

People in the contemplation and preparation stages are more ready to change than the precontemplators and are more open to recommendations about moderate physical activity. Contemplators are considering changing their behavior, but are still ambivalent because they perceive that the barriers to being physically active still outweigh the benefits.

Strategies to promote behavior change among contemplators include:

- Helping people in the target audience address their barriers and weigh the pros and cons of moderate physical activity
- Increasing confidence regarding physical activity by using motivating messages and opportunities to build necessary skills for activity
- Encouraging individuals to set small objectives that can later be changed into a long-term goal

Preparers may know what to do to be physically active but their actions are inconsistent.

Strategies to promote behavior change among preparers include:

- Developing a plan for regular moderate activity with emphasis on realistic objectives
- Showing people that physical activity can be fun and reinforce their intentions to be more active

- Encouraging people to focus on their successes and to seek support
- Emphasizing learning basic skills

People in the maintenance stage have successfully sustained a level of physical activity for more than six months. They may have experienced lapses, but they were successful in reestablishing their increased level of physical activity.

People are more likely to stay physically active if they set themselves up to succeed from the start.

Strategies to promote behavioral change among maintainers include:

- Choosing realistic goals
- Learning to do the activities they like correctly and safely
- · Charting progress to show improvement
- Minimizing barriers

Relapse

It is important for people who initiate increased levels of physical activity to obtain relapse management skills. Although people may become committed to their level of physical activity, it is easy and common for individuals to take breaks from these regular activities. Such breaks may occur because of illness, change in weather or family emergencies.

When breaks from the normal physical activity routine occur and the individual fails to get back into the normal level of activity, it is important to ask a few questions to determine if a relapse has occurred:

- Was there ever a time in the recent past when the person was regularly active for at least three months?
- How did he or she overcome barriers to being active and maintain an active lifestyle before?
- What has worked for him/her in the past?
- What was not helpful?
- What has caused this current relapse and how can its recurrence be prevented?

Once the source of the relapse is identified, the individual can get back on track by setting a goal to return to a normal level of activity.

Children may encounter the same stages of change as adults: precontemplation, contemplation, preparation, action and maintenance. Although there is considerable research validating this model's applicability to adults, research for its applicability to children less than 9 years of age is more limited. Thus, consider this model as a general framework for health behavior change for children.

The following factors affect children's and adolescents' physical activity levels:

- Self-efficacy
- Expectation of positive outcomes from physical activity
- Barriers that make it difficult to participate in physical activity
- · Enjoyment of physical activity

To begin a safe and effective physical activity plan, assess the child's or adolescent's self-efficacy, knowledge of the benefits of physical activity, perceived barriers to participation in physical activity, and stage of change, along with the medical history and physical examination results, and family and community resources.

STAGES OF CHANGE AND APPROPRIATE STRATEGIES

Precontemplation:

Goal: Encourage the child/adolescent to participate in physical activity by:

- Helping the child/adolescent to identify the positive reasons for engaging in physical activity
- Explaining these benefits as they pertain to the child/adolescent; personalizing the reasons especially helps
- Recommending that the child/adolescent consider beginning some type of physical activity; a physician's recommendation has been shown to be especially effective

Contemplation and Preparation:

Goal: Help the child/adolescent develop a plan for participating in physical activity by:

- Motivating the child/adolescent by helping to identify what he or she will gain from being physically active
- Helping the child/adolescent choose appropriate physical activities, especially ones that he or she enjoys and feels comfortable doing
- Helping the child/adolescent identify personal barriers
- Helping the child/adolescent assess confidence in his or her ability to become physically active; if confidence is low, revise the physical activity plan to make it less daunting

Action and Maintenance:

Goal: Encourage the child/adolescent to participate regularly in physical activity by:

- Praising the child/adolescent for being physically active to increase his or her likelihood of participating in physical activity on a regular basis
- Helping the child/adolescent remain physically active by identifying strategies to help him or her stick with the physical activity plan
- Helping the child/adolescent identify social support, which is crucial to the longevity of a physical activity routine
- Helping the child/adolescent assess confidence in his or her ability to remain physically active and asking what will help him or her to continue with the plan

Adapted from Bright Futures in Practice: Physical Activity (2001)



Given the extensive research on the benefits of physical activity, it is difficult to understand why so many people do not make it a priority in their lives. Many barriers keep people from becoming physically active, and they must be overcome for successful behavior change. The most common of these are:

Boredom

Solution: Try a social activity you can do with a friend or family member to make exercise more enjoyable and to provide social support. Try different forms of physical activity such as yoga, cardio dance, kayaking, sledding, water sports or rollerblading to keep activities exciting.

Fear of injury

Solution: It is important to choose an activity that has minimal risk of injury. Learn the proper ways of warming up and the precautions to take during physical activity. Depending on your age, current activity level, skill level and health status, your plan will vary.

Lack of skill or coordination

Solution: Try activities that you are already familiar with. Walking, jogging, climbing stairs and perhaps biking are probably activities that you already engage in on a daily basis. Just raise the intensity a bit and pick up the pace to start burning calories faster!

Guilt over taking time from family for physical activity

Solution: Find a compromise you can adjust to. Try using your lunch hour at work or getting up early before the kids wake up for a brisk walk or jog. Other suggestions are to be active with your family by playing games such as tag or taking the family on a nature hike.

Lack of time

Solution: By closely monitoring all of your daily activities throughout the week, it is likely you will find time for three 30-minute physical activity sessions. Try waking up a half-hour earlier to walk your dog, getting off a stop earlier when riding the bus or subway and walking the rest of the way, and climbing the stairs of an escalator the next time you are on one.

Lack of energy

Solution: Try scheduling your physical activities during the time of day when you have the most energy. A simple walk around the block is better than nothing; every little bit counts. After you have given movement a chance, you will find that your energy levels will increase.

Inhibition

Solution: Stay at home. Walk around your house and yard as much as possible. Try keeping the cleaning supplies far from the area that is being cleaned so you need to move more. Gardening or any other kind of yard work can be an effective way to become more active.

Expense

Solution: Use whatever you already have available. Go for a walk or jog, jump rope or try some stair climbing. Also, look for convenient, free resources available in your community, such as park and recreation programs and worksite programs.

Feeling that it is too late to reverse years of inactivity

Solution: No matter what your starting point, it is never too late to become physically active. Evidence shows that many people 90 years and older who have become frail from inactivity have successfully built their strength through simple activities in a short time. Physical activity benefits can still be achieved regardless of years of inactivity.

Retirement

Solution: Your retirement should be a time to be more active, not less. If keeping up the pace is a problem, try going for walks with people who move at the same pace as you. Use the time you have to make physical activity a part of your daily life.

INDIVIDUAL CHANGE Fact Sheet

Guidelines to Implementing Healthy Behavior

Among the most important building blocks of any behavior change intervention are high self-efficacy, a strong intention and readiness to change, a supportive social network and a nurturing environment.

Experts have concluded that for a behavior change to be successful and long-lasting, one or more of the following determining factors must be present:

- · Belief that the advantages of performing the behavior outweigh the disadvantages
- A positive emotional reaction to the behavior
- Compliance with personal standards or values while performing the behavior to prevent feelings of guilt
- A strong commitment to the behavior and intention to follow through
- · The necessary skills to perform the behavior
- High self-efficacy and faith in one's capabilities
- An environment free of constraints

Setting Goals

Experts feel that setting accurate goals is a crucial first step in changing behavior. However, goals must be:

- 1. Specific: Instead of saying you will walk more, set a goal of walking 30 minutes a day.
- 2. Attainable: Don't try to run 10 miles on your first day. Set your goal at a pace you can achieve and then progress from there.
- **3. Forgiving:** Sometimes it is hard to follow our goals because things get in the way. Keep this in mind when setting goals. For example, strive to swim five days a week instead of every day, or if you overslept take your walk in the evening instead of the morning.

Motivation to Change

Motivation to begin a behavior change is developed through several variables. Some of these are:

- Past experiences
- Attitudes
- Perceptions
- Beliefs
- Values
- Emotions
- Self-efficacy
- Influence of others
- Readiness to make the change

IDEAS TO INCREASE MOTIVATION IN OTHERS

- Recommend setting personal goals to work toward
- Use questionnaires to assess personal readiness to change.
- Emphasize incremental changes.
- Encourage use of logs to monitor progress.
- Use physical activity testing at health fairs to determine each individual's level of preparedness.
- · Create messages about physical activity that target personal values such as helping the environment and raising self-esteem.
- Encourage people to make a commitment; they will be more likely to carry out the behavior.
- Find a spokesperson whom your audience can relate to, preferably someone within the community who was successful in changing his/her behavior.
- Celebrities and athletes can be effective motivational speakers.
- Motivate people through competition with the use of rewards, recognition
- Organize competitive events between individuals, neighborhoods and organizations.
- Collaborate with physicians and encourage them to speak to their patients about the benefits of physical activity.
- Increase levels of self-efficacy within your target audience.
- Use reminders to be physically active to reinforce good intentions such as keeping gym shoes by the door or car, hiding the remote control or writing a note to be physically active and putting it in a place where it is sure to seen.

Motivation will depend on outside reinforcers such as rewards, punishments and social support. Since adopting a new behavior is difficult, a person must believe that the benefits derived from physical activity will outweigh the disadvantages.

What kinds of rewards are likely to motivate people?

Since rewards are subjective, they should match your target audience's desires, preferences and personal needs. Rewards are effective because they raise self-efficacy levels, which increase the likelihood that the behavior will be repeated.

Combine praise and encouragement supported by a material reward, and use intrinsic rewards to encourage the audience to sustain the behavior over time. However, note that the overuse of material rewards will eventually become less effective as a motivational strategy.

Material rewards that have been used successfully as reinforcers for motivation include discounts for recreational facilities, health club memberships, exercise equipment, active apparel, free meals, public recognition and award ceremonies.

A way to target an audience effectively is to narrow down the population into small groups. Segment the population according to the characteristics they have in common.

INFORMATION TO CONSIDER

Demographic data

Geographic information

Current behaviors and lifestyles

Values, beliefs and attitudes

History

Knowledge and awareness

Media channels used

Physical health status

Skill levels

Levels of self-efficacy

Cultural and social norms

Supporting and reinforcing

social networks

Physical environment and resources

Political environment

Tailoring Intervention

Understand the reasons people are or are not adopting the desired behavior, the strength of their intentions, the level of skills to maintain the change and the nature of social and environmental constraints. If the target audience does not seem committed, the intervention will not be successful.

Help strengthen their commitment by:

- Educating them and clarifying what is not understood
- Correcting misconceptions of what the outcome will be
- Creating links between adopting the desired behavior and something highly valued
- Creating social and environmental support

If the audience already has a strong commitment to adopting the desired behavior, help them minimize relapse by:

- Improving necessary skills to sustain long-term physical activity levels
- Providing opportunities to practice new skills
- Increasing social support
- Dealing with environmental constraints that could inhibit progress

Questions an Audience May Ask

- Q: What is physical activity and how does it differ from exercise and physical fitness?
- A: Physical activity is any movement that results in energy expenditure. Exercise is structured activity and usually has fitness as a goal. Physical fitness is the end result, an attribute one can achieve by being physically active. Studies reveal that any kind of physical activity will produce significant health benefits. One does not need to achieve a high level of physical fitness to enjoy the benefits.
- Q: What precautions should be taken before beginning a physical activity program?
- A: To avoid soreness and injury, individuals contemplating a more physically active lifestyle should start out slowly and gradually build up the frequency or intensity in order to give the body the time it requires to adjust. People with chronic health problems such as heart disease, diabetes or obesity or those at high risk for developing these problems should consult a physician.
- Q: Do activities need to be intense in order to be beneficial?
- A: Not at all. Emerging consensus among epidemiologists, experts in exercise science, and other health professionals is that physical activity need not be of vigorous intensity in order to improve health. The amount of benefit is directly proportional to the amount of physical activity performed.
- Q: What is meant by a moderate amount of physical activity?
- A: Moderate physical activity uses approximately 150 calories of energy per day, or 1,000 calories per week. A moderate amount of physical activity can be achieved several different ways. People should select activities they enjoy and can fit into their daily lives. Because amount of activity correlates with intensity, duration and frequency, the same amount of activity can be obtained in longer sessions of moderately intense activities (such as brisk walking) or in shorter sessions of more strenuous activities (such as running).
- Q: When will the benefits of physical activity begin?
- A: Physical activity benefits everyone differently. Many of the important changes that will take place will happen internally and therefore you may not be aware of them. Not all benefits are visible, but you will feel an increase in energy level—so keep on moving.

PROMOTING AWARENESS Fact Sheet

FINDING THE ROOT CAUSE

What contributes to poor health? To answer this question we should not focus solely on the physiological causes of disease or death. Cultural and behavioral habits, which are key risk factors for disease and death, also must be examined. These habits are the root causes of most non-communicable diseases and are directly linked to our lifestyles and environment. Thus, in order to implement healthy behaviors, we need to educate and encourage people to work within their environment and situation to change the habits that are inhibiting them from being physically active.

Promoting awareness is important because it supplies people with the knowledge they need to understand why physical activity is necessary in their daily lives, how they can incorporate it into their lives and what factors may impede this process.

The target audience must be aware of:

- The benefits of moderate physical activity
- The consequences of an inactive lifestyle
- Different intensity levels and examples of moderate and vigorous activities
- How to begin a physical activity schedule
- How to overcome the barriers that have kept them from being physically active
- Where to obtain support and community resources

Remember that each individual is at a different stage of change, and techniques to raise awareness must be developed according to the needs of the target audience.

Purposes of raising awareness in health promotion:

- Communicates important information and encourages changes in values, attitudes and emotions related to physical activity
- Increases the individuals' self-efficacy and motivation
- · Gives individuals access to services that will reinforce the desire to make the behavior change

People can create healthy environments that promote healthy behaviors and address sources of illness and death. Community members must know that they have the power to affect the health of their community. Health is not just a medical problem for hospitals and doctors to handle. It is a series of healthy behaviors and diverse structures supporting these healthy behaviors. All people have the ability to alter the cultural structures that can impede or improve health.

Here are some tips for raising knowledge and awareness of physical activity in your community:

- · Partner with physical therapists and physical activity specialists for suggestions on activity programs.
- Instruct physicians to advise their patients better on physical activity.
- · Create self-instructional videos, audiocassettes, computer programs and manuals.
- List places within the community where people can go to find an opportunity to improve their skills.
- Develop informal workshops, classes and seminars on physical activity.
- Reward success to enhance self-efficacy.

TIPS FOR PLANNERS

See a comprehensive list of resources and contact information on pages 31-35.

After you have launched your activity, please complete the Follow-Up Report on page 39.

Consider copying the Fact Sheets found on pages 12-23 for use in your activities or mailings.

ENVIRONMENTAL INFLUENCE ON BEHAVIOR CHANGE

Because an individual's success in initiating and maintaining a change in behavior depends on his/her environment (social, physical or political), this should be a primary area of focus and concern.

Community leaders must help people realize that they have control over their environments.

If people can understand that a change is possible and within their capabilities, they will be more inclined to become active participants. Individuals can start by making improvements within their own personal environments by:

- Building positive reinforcements
- Creating social support networks in the home, in the workplace, at school or as active members of community organizations

When individuals are successful in building networks, they are able to make greater changes by collaborating with public agencies, private organizations and local businesses.

SOME IDEAS TO PROMOTE **ACTIVITY INCLUDE:**

Widen sidewalks so they are less crowded, safer and more inviting.

Create safer crosswalks so people are not putting themselves at risk for injury when crossing the streets, especially in large commuter cities.

Make the streets more esthetically pleasing by planting trees and flowers and ensuring that litter is collected frequently.

Make people aware of the advantages that exist when people walk instead of using motorized transportation.

Place posters or distribute pamphlets in strategic areas to give people statistics on how much money they will save, the positive effects on the environment, and countless health benefits.

Please refer to the Motivate and Educate section for more ideas on how to promote physical activity.

Promoting physical activity in our communities depends largely on how the target population relates to their environment. The barriers that prevent people from becoming physically active must be addressed and overcome.

These suggestions will affect the people who are in the contemplation stage of behavior change and move them toward the action phase. For those who are already physically active, adjustments in the environment can support existing behavior and encourage maintenance.

Even small changes will begin to alter people's attitudes toward their surroundings. People will be more inclined to walk to the grocery store and even bike to work instead of habitually driving.

What are the ingredients of a supportive environment?

A supportive environment must be able to provide resources and foster a behavior change for a given population. This includes:

- A social network in which people are supportive of one another's efforts to be physically active
- Favorable and safe conditions
- · A political infrastructure in which policies and legal incentives exist to support people's desire to achieve and maintain a physically active lifestyle

Did you know?

- Between 1977 and 1995, trips made by walking declined while driving trips increased
- 25% of all trips made are one mile or less, yet 75% of these short trips are made by driving
- Children between the ages of 5 and 15 today walk or ride their bicycles 40% less than children in 1977
- 31% of school trips one mile or less are made on foot
- Only 2% of school trips under two miles are made by bicycling



CREATING A WALKABLE COMMUNITY Fact Sheet

CHALLENGES WITHIN YOUR COMMUNITY	IMMEDIATE ACTIONS THAT YOU AND YOUR FAMILY CAN TAKE	WHAT YOU AND YOUR COMMUNITY CAN DO WITH MORE TIME		
NOT ENOUGH ROOM TO WALK SAFELY Sidewalk was started but never finished Sidewalk is cracked or broken Sidewalk is blocked No sidewalk at all Heavy traffic	 Temporarily change your route Notify local transportation engineers or public works department about specific problems 	 Voice your opinion at board or development meetings Gather signatures in your neighborhood and petition the city for walkways Try to involve the media in the issue 		
NOT EASY TO CROSS STREETS				
 Road is too wide Not enough time to cross because traffic signals change too rapidly Road does not have crosswalks or traffic signals View of traffic is blocked by parked cars and/or trees Road needs curb ramps or curb ramp needs repair 	 Temporarily change your route Notify local transportation engineers or public works department Trim the trees or bushes that may be blocking the street and ask neighbors to do so as well Try leaving polite notes on cars that should not be parked where they are 	 Express your desire for more crosswalks, better traffic signals of parking changes at city meetings Report illegally parked vehicles to authorities Ask that the public works department trim trees Try to involve the media 		
PEDESTRIANS WHO FAIL TO FOLLOW SAF	ETY RULES			
 Cross where they cannot be seen Do not stop and look both ways before crossing Do not walk on sidewalk or shoulders Do not cross with the traffic light 	 Educate yourself and your family about safe walking Encourage parents within your community to walk their children to school 	 Encourage schools to teach pedestrian safety Encourage corporate support for flexible schedules so that parents can walk children to school 		
POOR DRIVERS				
 Back out without looking Do not yield Turn when pedestrians have the right of way Drive through red lights or speed through yellow 	 Temporarily change your route Set an example: slow down and be mindful of pedestrians Encourage your neighbors to do the same Report poor drivers to authorities 	 Organize a speed watch program in your neighborhood Petition for increased enforcement of driving laws Ask city planners and traffic engineers for ideas to minimize traffic 		

UNPLEASANT WALK

- Unfriendly dogs
- Suspicious activity
- Trash, litter
- Poorly lit area
- No grass, flowers or trees
- Temporarily change your route
- · Ask neighbors to keep dogs on a leash
- Report suspicious activity to the police
- Pick up trash as a family
- Request better lighting from the city
- Plant trees and flowers

- Request increased police enforcement and patrol
- Start a crime watch program in your neighborhood
- Organize a community clean-up day
- Sponsor a neighborhood beautification day

Policy interventions require political change. The public has an important role in changing policies and must support programs for a lasting impact. Leadership groups are needed to plan, coordinate, implement, and serve as advocates for these initiatives. The most relevant areas for physical activity policy interventions are public health, medicine, education, recreation departments. physical activity organizations, research groups, transportation, urban planners and various government organizations.

Policies have a direct impact on physical activity. Since reinforcement is known to be effective in changing behavior, agencies can provide incentives to increase levels of physical activity.

Educational and behavior change programs are other options to make policy changes. These programs are expected to have two effects:

- · Motivate and teach skills that help people begin and maintain physical activity
- Encourage people to use supportive environments

IDEAS FOR ESTABLISHING AND ENFORCING POLICIES SUPPORTIVE OF PHYSICAL ACTIVITY

Criminal justice, police and community organizations should:

- Collaborate in crime prevention efforts that will make neighborhoods safer and more conducive to physical activity
- Enforce lower speeds and introduce more stoplights
- Advocate that a portion of highway and transportation funds be set aside to construct bicycle paths and promote walking

Transportation departments should:

- Design new bike paths
- Adopt policies to ensure that paths are safer and more attractive for users
- Develop incentives for non-automotive transportation, which could incidentally reduce traffic congestion
- Advocate a ban on vehicular traffic in some areas

Governments should:

- Make sidewalk maintenance a priority
- · Play a key role in building an infrastructure that supports walking and biking for commuting, shopping and other daily activities
- Ensure that programs and facilities are available to all citizens
- Alter the economics of physical activity by reducing subsidies for industries that rely on sedentary behavior (e.g. automobiles, oil companies) and

increasing subsidies for industries that are relevant to promoting physical activity (e.g., bicycle manufacturers)

- Use tax revenues to pay for pedestrian-friendly modifications
- Give tax breaks when land is used for recreation
- Pass ordinances indicating which kind of street lights are needed and where they should be placed in order to increase safety

Parks and recreation departments should:

- Consider the distribution of their programs and the extent to which they contribute to physical activity in a population
- Establish programs to plant trees and clean beaches, which encourage increases in physical activity while simultaneously helping the environment
- Encourage developers to build sidewalks and playgrounds

Urban planners, architects and builders should:

- Ensure equal distribution of facilities
- Build infrastructure for walking and cycling into new developments and redevelopment projects
- Support walking and biking as part of the mass transit system, thus facilitating physical activity
- Modify parking regulations to minimize the number of parking spaces required for businesses and new construction
- Redesign buildings so that climbing stairs is no longer discouraged

Workplaces, shopping districts and churches should:

- Add physical activity programs
- Keep staircases open for public use

Schools should:

- Open their facilities for public use
- Ensure that the curriculum encourages physical activity and physical education

Employers should:

- Provide incentives to physically active employees or offer privileges to those who commute by walking or cycling
- Reimburse local travel the same even if employees walk or ride a bicycle

Health insurance companies should:

 Provide lower rates and discounts to physically active individuals

Planning for World Health Day and Beyond

World Health Day is an opportunity to encourage awareness of the importance of physical activity. The goal is to motivate individuals, communities, and states to become involved in this issue. World Health Day can be observed in many ways. To help coordinate events in your community, refer to the following checklist.

RESEARCH PHYSICAL ACTIVITY OPPORTUNITIES IN YOUR AREA

Check with your local health department or recreation department for physical activity opportunities in your area to determine how they can be improved or utilized by you and your community.

2. DEVELOP PARTNERSHIPS

Establish or join partnerships with individuals and organizations interested in planning World Health Day activities in your community. These might include advocacy groups, places of worship, schools, libraries, civic associations, hospitals, fitness clubs, businesses, or youth groups. Call your local and state health and education departments for leads.

3. TARGET AN AUDIENCE

Define your goals and decide who you want to reach with your program (e.g., youth, families, elected officials, specific demographic groups, members of a particular faith community).

4. SELECT AN ACTIVITY

Choose an activity or program that will appeal to your target audience and one that will achieve your objectives. (See the Motivate and Educate section.)

5. CREATE A PLANNING CHECKLIST

Create a timeline so you will remain organized and will not miss deadlines. Delegate specific activities and responsibilities when possible. Make a schedule, establish a budget and identify organizations that will help you or co-sponsor with you. Choose a location, estimate the number who will attend, plan and prepare materials you will distribute, and plan advertising strategies.

6. SEEK FUNDING

To secure the necessary funds and resources, establish partnerships to share expenses, plan fundraising events or seek grants to fund your project.

7. INVITE PARTICIPATION

Invite members of your community, especially those groups you have targeted. Also consider inviting a wider audience to promote awareness of physical activity issues. Often invitations themselves help raise awareness or encourage others to become involved. (See the Media Outreach Guide section.)

8. PUBLICIZE YOUR EVENT

Use the media to get the word out. Follow up with phone calls to targeted groups. (See the Media Outreach Guide, Sample Press Release and Public Service Announcement sections.)

9. NOTIFY THE MEDIA

Getting your message out through television, radio and newspapers is a highly effective way of reaching your target audience. (See the Media Outreach Guide, Sample Media Advisory and Sample News Release sections.)

10. EVALUATE YOUR ACTIVITY.

Evaluate your activity during the planning stages as well as after the event so that next year you can remember how to improve the process. Use this planning checklist to evaluate how well you met your objectives. On the day of your activity, ask participants to fill out a short, anonymous evaluation form.



Motivate and Educate

The ideas listed below challenge everyone—members of the community, teachers, public health educators and members of the faith, business, and health communities—to use their creativity to inform themselves and their peers about the importance of physical activity.

IN THE COMMUNITY

- Work with state and local health departments or recreation departments to involve your community in physical activity programs.
- Use the sample proclamation in this booklet and officially declare April 7 World Health Day in your community to focus on getting people moving.
- Organize community panels to provide resources and answer questions about opportunities for physical activities in your area.
- Distribute fact sheets from this booklet for use in community education.
- Volunteer to be a buddy for a mentally disabled individual and help him or her achieve his or her physical activity goals.
- Expand access to gyms and playgrounds and mark out walking trails in the community.
- Develop a resource list of physical activities in your community.
- Organize a walk or dance to spread awareness of the importance of physical activity.
- Coordinate an initiative in your community to widen sidewalks, create safer crosswalks, and provide welllit bike paths to encourage physical activity.
- Visit your local senior center and organize a morning walk with the residents.

IN THE CLASSROOM

- Educate students about the importance of daily physical activity and increase the variety of activities in physical education.
- Start a program at your school raising awareness and providing knowledge about physical activity among students and staff. Establish a supportive environment and teach students how to increase their motivation.

- Invite a person to speak about different activities or places in your area where students can go to participate in physical activity.
- Encourage students to brainstorm different activities or locations where they can do physical activity and invite them to report back to the class about their experiences.
- Organize an activity in which students list excuses they make to not participate in physical activity and then together come up with solutions to overcome the excuses.
- Mark trails, stairs, and hallways to encourage walking.
- Incorporate physical activity and physical education into the K-12 curriculum and create policies that support health promotion and rewards for improved health in your school.
- Place a question box in classrooms where students can ask anonymous questions that will be answered by teachers.
- Conduct a School Health Index to measure how your school is promoting healthy behavior using the CDC's School Health Index website at http://www.cdc.gov/nccdphp/dash/

AT WORK

- Put up signs by elevators encouraging employees to use the stairs.
- Coordinate with a local health club to give reduced rates to employees.
- Form a support group to encourage coworkers to set goals and help each other follow through with their goals.
- Offer longer lunch periods, giving employees the opportunity to participate in physical activity during their break.
- Mark walking trails in and around your worksite.
- Display posters or flyers around the office about healthy living and physical activity.
- Form a walking or swimming club that meets before or after work.
- Turn the company picnic into a day of physical activity and encourage employees to bring their family and friends.
- Provide incentives for employees who walk or bike to work.

- Organize a contest with your coworkers on the most creative ways of including physical activity in your daily routine.
- Initiate a program to have physical activity messages inserted in paycheck envelopes and printed on bags or cartons.
- Reduce health insurance premiums for employees who are physically active.

IN COLLEGES AND UNIVERSITIES

Work with university administrators, faculty, staff and students:

- Create tabletop displays with physical activity information and place them in libraries, student centers and dining halls.
- Incorporate and promote physical activity information into courses.
- Offer incentives to students who are participating in physical activities on a daily basis.
- Encourage resident advisors to plan physical activities for their residents such as hikes or bike rides.
- Organize a health fair with booths assisting individuals in determining their physical activity levels and providing information about different forms of physical activity.
- Coordinate with popular restaurants or bars to pass out literature focusing on the importance of physical activities.
- Encourage your local health club or recreation venues to offer discounted memberships to students.
- Organize study breaks such as midnight basketball or water polo to help students get moving.

IN FAITH COMMUNITIES

- Participate in or establish collaboration with interfaith observances of World Health Day in your community.
- Create a World Health Day display at your place of worship.
- Conduct health fairs and workshops on the importance of physical activity.
- Send reminders to members about the importance of healthy lifestyles and physical activity.

IN GOVERNMENT

Governments should participate in World Health Day. Effective physical activity programs and education can benefit from high-level political commitment.

- Sponsor a World Health Day information session to discuss different strategies for physical activity.
 Personally invite various school and community organizations.
- Adopt a proclamation (see the Sample Proclamation section) urging citizens to take part in World Health Day activities and observances.
- Prepare a press package describing World Health Day events locally and in your state.
- Invite speakers to your state capitol or city building to speak on physical activity.
- Advocate for local, state and national policies that promote physical activity for all people.
- Perform a needs assessment in your community and develop policies that address unmet physical activity needs especially in underserved populations.

IN HEALTH CARE SETTINGS

In health care settings, the campaign for physical activity should continue not only on World Health Day, but also throughout the entire year.

- Routinely inquire as to your patients' physical activity and encourage them to participate 30 minutes a day most, or preferably all, days of the week.
- Post a sign in your waiting and examining rooms encouraging patients to participate in physical activity and to ask if they have questions or concerns.
- Sponsor community-wide education and skillbuilding physical activity programs.
- Copy, display and distribute reading material and fact sheets from this booklet about physical activity to patients making office visits.
- Endorse lower health insurance rates and provide incentives for employees who are physically active.
- Help support public awareness efforts to inform the public about issues surrounding physical activity.

Media Outreach Guide

This guide provides information on how to understand and work with the three primary mass media venues—television, radio, and print.

I. UNDERSTANDING THE NEWS MEDIA

From the media's point of view, the three most important elements in a good story are action, people and substance. Match the media's need with your message and ensure that the information is provided to them in a timely manner. In order to develop appropriate media activities and messages, ask yourself:

- What goal(s) do you want to accomplish in your World Health Day event?
- Who is your target population?
- What messages must be developed and conveyed to influence your target audience to make the desired changes?
- What role do you want the community to have?
- What types of media outreach would be efficient and cost effective for accomplishing the above?

II. TIPS FOR SUCCESS

- Look for ways to tie in with national World Health Day observances and physical activity awareness campaigns.
- Take the event on the road by co-sponsoring a series of similar events in different communities.
- Consider having a radio or TV station co-sponsor the event, which would highlight the station's commitment to the community and generate free publicity for your event.
- Use the World Health Day focus to attract both media and public attention. Use it on all publicityrelated materials, from invitations to media kits, buttons and banners.
- Allow plenty of planning time when selecting your date and time. Select a time when your most important audiences will be available and when conflicting events are not taking place.

III. TYPES OF NEWS MEDIA

Medium	Characteristics	Deadlines
Television	 Highly visible medium; visually portrays the importance of your message Graphics often used in segment Stories are brief (30- to 60-second segments) 	 Day before for breaking news (contact the assignment editor) By 10AM for the 6PM news 3 to 8 weeks in advance for an in-depth story
Radio	 10- to 15-second sound bites Be aware of tone and firmness of voice when responding to questions 	 Allow several days notice for public events
		- D : AM 0 0DM :
Newspaper	 More in-depth treatment of a subject May use direct quotes from press statement or news release 	 Daily AM: 2-3PM the day before Daily PM: early AM the day of issue Weekly: 3-5 days before issue goes to press
Magazine	 A highly visible medium; visually portrays the importance of your message Graphics often used in segment Stories are brief (30- to 60-second segments) 	 Targets specific segments of the public Explains more complex health/behavior 6-8 weeks before publication goes to press

IV. EVENT CALENDAR

Before the Event

TRACK YOUR MEDIA RELATIONS

Track your media contacts (i.e., phone conversations, press releases sent) by having all contact information (name of media person, organization, time, date and topics discussed) on a simple form.

PREPARE A NEWS RELEASE

News releases should include, in 1-2 pages, the five "W's":WHO is involved;WHAT happened;WHEN did it happen; WHERE did it happen; WHY or HOW did it happen? The lead paragraph should answer these questions in one or two sentences, especially since most reporters decide whether or not to read the rest of the release based on the first paragraph, and print editors tend to cut the article from the bottom up. The second and third paragraphs should include a colorful quote that reporters can use in their articles. (See the Sample Press Release section.)

Feature press releases can be 3-4 pages in length; an attention-getting heading is important.

Your news release may target specific groups, such as people of different age groups, ethnicities or genders.

SOME SUGGESTIONS FOR RELEASES

A profile of an active community member about what he or she has done

Fundraisers and projects that local groups organize in support of physical activity

Personal stories of physically active people

PREPARE MEDIA KITS

The media kit is a collection of information prepared for the media to be released on the day of the event. Examples of materials that might be included in a media kit are:

- Statistics on physical activity in your state, county or city
- Information on your organization and its physical activity programs
- Fact sheets and other resources from this booklet
- Business cards so the media can contact your agency about physical activity issues

- Brief, one-page biographies of key agency officials, event participants and/or spokesperson
- Photographs (most newspapers prefer black and white) and camera-ready graphics, such as charts and logos

OTHER PLANNING TIPS

- Write an opinion piece or a letter to the editor for your local paper.
- Contact the reporters who cover community events and pitch it as a future story.
- Call community calendar reporters at area newspapers and TV, cable and radio stations, asking them to place a calendar notice.
- Two weeks in advance, hand deliver or mail invitations.
- Two or three days in advance, call editors and reporters and ask if they plan to attend.
- The day before the event, call media again to politely remind them.

Day of the Event

- Set up a media sign-in table and distribute media kits to those who attend.
- When the reporters arrive, set up interviews with the key people, and escort media to the appropriate spokesperson.
- Issue name badges to promote better communication between media and individuals.
- Assign someone from your agency to take black-andwhite photos to accompany articles in newsletters and other publications.

After the Event

- Send a news release immediately to any reporters who were unable to attend.
- Send follow-up letters to editors of local newspapers thanking the community and informing them of your success.
- Write a follow-up article for community publications. Illustrate with photos from the event.
- Ask media for their photos of your event.
- Send a description of your event and a copy of photos to the American Association for World Health for possible use in our Follow-Up Report of activities across the United States. (See the Follow-Up Report section.)

Sample: Press Release

A press release should appear on your organization's letterhead and include the words "Press Release" on top as well as the contact person's name and telephone number and the release date.

(Your Community) to Observe World Health Day

On April 7, 2002, World Health Day will be observed around the world and in [your town] to focus on the need for physical activity, with the theme "Move for Health." Locally, [name of your organization] will coordinate World Health Day programs at [location, time]. [Insert brief description of your organization's events or activities].

This year's World Health Day activities will address the need to raise awareness of the various forms of physical activity, reduce the levels of inactivity within our communities, promote the benefits of physical activity, change policies to create more opportunities within communities for increased physical activity, and foster social support networks.

With 300,000 preventable deaths occurring each year in the United States due to diseases related to inactivity, this issue requires immediate attention. Currently, America's youth are less active than ever before, with more than half of 12- to 21-year-olds not engaging in regular vigorous physical activity. Support is greatly needed, and changes need to occur among all levels of the social structure, including the individual, group, organization, community, and society.

Worldwide, the lack of physical activity was responsible for 60% of global deaths and 43% of the global burden of disease in 1998. The benefits of physical activity are widespread, yet estimates show that 60-85% of the world's population are not physically active enough to obtain health benefits.

Many benefits result from increases in physical activity. For instance, it has been shown that if all inactive adults in the United States became physically active, the potential savings could have been upwards of \$75 billion in 2000. Not only will an increased physical activity level bring forth a healthier body, it may also lead to an improved state of mental health. Various forms of physical activities such as dancing and swimming are healthy ways of de-stressing the body and mind as well as a great opportunity to meet people or socialize with old friends. The key to get people moving is to find an activity that they enjoy and can fit into their busy schedules.

All communities are affected by inactivity. Here, in [name of community], [name of community leader] will be officially endorsing the concept when [s/he] reads the World Health Day Proclamation at [location] in commemoration of this year's theme, "Move for Health."

[Insert details of specific World Health Day activities that are planned for your area, as well as the organizing groups.] For additional information on these World Health Day activities, contact [name contact] at [phone number].

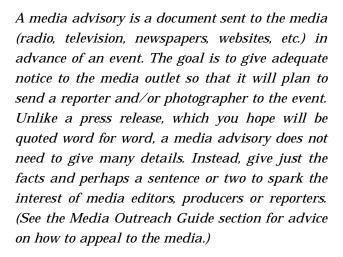
Sample: Public Service Announcement (PSA)

Millions of Americans are not getting the amount of physical activity that their body needs. Physical activity can help reduce the risk of developing heart disease, diabetes and colon cancer as well as decrease feelings of anxiety and depression. Physical activity is important for people of all ages and backgrounds, helping to build and maintain strong bones, joints and muscles. Activities to get you moving can be as simple as taking a 30-minute walk after dinner, parking your car at the end of the parking lot or playing tag with your children.

This year World Health Day focuses on physical activity and the need to increase our knowledge in promoting health. We must all work together to encourage accessible physical activity. The theme of this year's World Health Day in the United States is "Move for Health," so get moving!

29

Media Advisory Outline



The media advisory should appear on your organization's letterhead.



Elements of a Media Advisory

Date

Contact [Name, address, phone of contact person

at your agency]

Headline (ex. World Health Day to be observed)

[Include a secondary headline if you like]

What Describe your activity or program in a brief

paragraph.

Who

Host

Keynote Speaker [State, city, or community leader),

[Title]

Master of Ceremonies [Name and title]

When and Where: [Date and time of event] and [location,

street address, city, state, zip]

Sample: Proclamation World Health Day April 7, 2002

Whereas the World Health Organization has selected "Move for Health" as the theme of World Health Day, to be observed around the globe on April 7, 2002; and

Whereas physical activity affects the lives of all people in the United States and around the world; and

Whereas nearly half of U.S. young people ages 12 to 21 are not vigorously active on a regular basis; and

Whereas physical activity can reduce the risk of developing non communicable diseases thus enhancing the quality of life; and

Whereas six in ten adults are not sufficiently active to achieve the health benefits of physical activity; and

Whereas physical activity builds and maintains a healthy body and promotes well-being decreasing feelings of anxiety and depression; and

Whereas it is recommended that all people participate in physical activity most, or preferably all, days of the week for 30 minutes; and

Whereas World Health Day provides an opportunity to focus local, national and international attention on the necessity and benefits of physical activity; and

Whereas the American Association for World Health recognizes that physical inactivity is a major health concern in the United States and the world, and that individual, community, national and global collaboration is essential to educating and raising awareness of physical activity hence promoting the World Health Day 2002 focus, "Move for Health" in the United States;

NOW THEREFORE, BE IT PROCLAIMED that I,______, [title] do hereby declare that [your city] will observe World Health Day on April 7, 2002. I urge all citizens to take part in activities and observances designed to increase awareness and understanding of physical activity programs and benefits, and to join local, national and global efforts to improve knowledge of and accessibility to physical activity.

Resources

PHYSICAL ACTIVITY RESOURCES

AARP

601 E Street, NW Washington, DC 20049 Phone: (202) 434-2277 http://www.aarp.org

American Academy of Family Physicians

11400 Tomahawk Creek Parkway Leawood, KS 66211-2672 Phone: (913) 906-6000 http://www.aafp.org

American Alliance for Health, Physical Education, Recreation, and Dance

1900 Association Drive Reston, VA 20191 Phone: (800) 213-7193 http://www.aahperd.org

American Association for Active Lifestyles and Fitness

1900 Association Drive Reston, VA 20191-1599 Phone: (800) 213-7193 http://www.aahperd.org/aaalf

American Cancer Society

1599 Clifton Road, NE Atlanta, GA 30329 Phone: (800) ACS-2345 http://www.cancer.org

American College of Sports Medicine

401 W. Michigan Street Indianapolis, IN 46202 Phone: (317) 637-9200 http://www.acsm.org

American Council on Exercise

4851 Paramount Drive San Diego, CA 92123 Phone: (800) 825-3636 http://www.acefitness.org

American Nurses Association

600 Maryland Avenue, SW Suite 100 West Washington, DC 20024 Phone: (800) 274-4ANA http://www.ana.org

American Medical Association

515 North State Street Chicago, IL 60610 Phone: (312) 464-5000 http://www.ama-assn.org

American Obesity Association

1250 24th Street, NW Suite 300 Washington, DC 20037 Phone: (202) 776-7711

American Physical Therapy Association

1111 N. Fairfax Street Alexandria, VA 22314-1488 Phone: (703) 684-APTA http://www.apta.org

American Public Health Association

800 Eye Street, NW Washington, DC 20001 Phone: (202) 777-APHA http://www.apha.org

Canadian Lifestyle and Fitness Research Institute

201-185 Somerset Street West Ottawa, Ontario K2P OJ2 CANADA Phone: (613) 233-5528 http://www.cflri.ca

Centers for Disease Control and Prevention (CDC)

National Center for Chronic Disease Prevention and Health Promotion Division of Nutrition and Physical Activity Mail Stop K-46 4770 Buford Highway, NE Atlanta, GA 30341-3717 Phone: (770) 488-5820 http://www.cdc.gov/nccdphp/dnpa E-mail:cdcinfo@cdc.gov Faxed info line: 1-888-CDC-4NRG or

Health Resources and Services Administration

5600 Fishers Lane Parklawn Building Rockville, MD 20857 Phone: (888) 275-4772 http://www.hrsa.gov

1-888-232-4674

Human Kinetics

1607 N. Market Street Champaign, IL 61825 Phone: (800) 747-4457 http://www.humankinetics.com

Local Government Commission

1414 K Street Suite 600 Sacramento, CA 95814 Phone: (916) 448-1198 http://www.lgc.org

National Association of County and City Health Officials (NACCHO)

1100 17th Street, NW 2nd Floor Washington, DC 20036 Phone: (202) 783-5550 http://www.naccho.org

The National Association for Health & Fitness

The Network of State and Governors' Councils 401 W. Michigan Street Indianapolis, IN 46202-3233 Phone: (317) 955-0957 http://www.physicalfitness.org

National Coalition for Promoting Physical Activity

1010 Massachusetts Avenue, NW Suite 350 Washington, DC 20001 Phone (202) 454-7521 http://www.ncppa.org

National Collegiate Athletic Association

PO Box 6222 Indianapolis, IN 46206-6222 Phone: (317) 917-6222 http://www.ncaa.org

National Conference of State Legislatures

444 N. Capitol Street, NW Suite 515 Washington, DC 20001 Phone: (202) 624-5400 http://www.ncsl.org

National Heart, Lung and Blood Institute

Building 31, Room 4A-21 Bethesda, MD 20892 Phone: (301) 496-4236 http://www.nhlbi.nih.gov NHLBI's Hearts n' Parks Program: http://www.nhlbi.nih.gov/health/prof/heart /obesity/hrt_n_pk/index.htm#base

National Institute of Child Health and Human Development

31 Center Drive Building 31, Room 2A32 Bethesda, MD 20892-2425 Phone: (800) 370-2943 http://www.nichd.nih.gov

National Institute of Diabetes and Digestive and Kidney Diseases

Building 31, Room 9A04 Center Drive, MSC 2560 Bethesda, MD 20892-2560 Phone: (800) 860-8747 http://www.niddk.nih.gov

National Institute of Mental Health

6001 Executive Boulevard Room 8184, MSC 9663 Bethesda, MD 20892-9663 Phone: (301) 443-4513 http://www.nimh.nih.gov

National Institute on Aging

31 Center Drive, MSC 2292 Building 31, Room 5C27 Bethesda, MD 20892 Phone: (301) 496-1752 http://www.nia.nih.gov

National Latina Health Network

1680 Wisconsin Avenue, NW 2nd Floor Washington, DC 20007 Phone: (202) 965-9633 http://www.nationallatinahealthnetwork.com

Office of the Surgeon General

5600 Fishers Lane Suite 1867 Parklawn Building Rockville, MD 20857 Phone: (301) 443-4000 http://www.surgeongeneral.gov

Pan American Health Organization

Regional Office of the World Health Organization 525 23rd Street, NW Washington, DC 20037 Phone: (202) 974-3000 http://www.paho.org

The President's Council on Physical Fitness and Sport

Department of Health and Human Services Humphrey Building, Room 738H 200 Independence Avenue, SW Washington, DC 20201 Phone: (202) 690-9000 http://www.fitness.gov

Special Olympics, Inc.

1325 G Street, NW Suite 500 Washington, DC 20005 Phone: (202) 628-3630 http://www.specialolympics.org

Sporting Goods Manufacturers Association

200 Castlewood Drive North Palm Beach, FL 33408-5696 Phone: (561) 842-4100 http://www.sgma.com

U.S. Conference of Mayors

1620 Eye Street, NW Suite 400 Washington, DC 20006 Phone: (202) 293-7330 http://www.usmayors.org

U. S. Department of Health and Human Services

200 Independence Avenue, SW Washington, DC 20201 Phone: (877) 696-6775 http://www.dhhs.gov

Office of Minority Health Resource Center

PO Box 37337 Washington, DC 20013-7199 Phone: (800) 444-6472

United States Olympic Committee

One Olympic Plaza Colorado Springs, CO 80909 Phone: (719) 632-5551 http://www.usoc.org

World Health Organization

Headquarters in Geneva Avenue Appia 20 1211 Geneva 27 Switzerland Phone: (+011 41 22) 791-2111 http://www.who.int

YMCA-USA

National Council of Young Men's Christian Associations of the United States of America 101 North Wacker Drive Chicago, IL 60606 Phone: (312) 977-0031 http://www.ymca.net

ENVIRONMENTAL RESOURCES

National Recreation and Park Association

22377 Belmont Ridge Road Ashburn, VA 20148 Phone: (703) 858-0784 http://www.nrpa.org

American Planning Association

122 S. Michigan Avenue Suite 1600 Chicago, IL 60603 Phone: (312) 431-9100 http://www.planning.org

Bicycle Federation of America

1506 21st Street, NW Suite 200 Washington, DC 20036 Phone: (202) 463-6622 http://www.bikefed.org

Congress for the New Urbanism

The Hearst Building 5 Third Street Suite 725 San Francisco, CA 94103 Phone: (415) 495-2255 http://www.cnu.org

Federal Highway Administration

Nassif Building 400 7th Street, SW Washington, DC 20590 Phone: (202) 366-0650 http://www.fhwa.dot.gov

Institute of Transportation Engineers

1099 14th Street, NW Suite 300 West Washington, DC 20005-3438 Phone: (202) 289-0222 http://www.ite.org

Rails-To-Trails Conservancy

1100 17th Street, NW 10th Floor Washington, DC 20036 Phone: (202) 331-9696 http://www.railtrails.org

US Access Board

1331 F Street, NW Suite 1000 Washington, DC 20004-1111 Phone: (800) 872-2253 http://www.access-board.gov

U.S. Environmental Protection Agency

1200 Pennsylvania Avenue, NW Washington, DC 20460 Phone: (202) 260-2090 http://www.epa.gov

RESOURCES FOR SAFER, MORE ATTRACTIVE NEIGHBORHOODS

National Crime Prevention Council

1000 Connecticut Avenue, NW 13th Floor Washington, DC 20036 Phone: (202) 466-6272 http://www.ncpc.org

National Safety Council

1121 Spring Lake Drive Itasca, IL 60143-3201 Phone: (630) 285-1121 http://www.nsc.org

National Arbor Day Foundation

100 Arbor Avenue Nebraska City, NE 68410 Phone: (402) 474-5655 http://www.arborday.org

AAWH World Health Day 2002 Move for Health

Resources

RESOURCES FOR WALKING AND HEALTH

Prevention Magazine's Walking Club

33 East Minor Street Emmaus, PA 18098

Shape Up America!

6707 Democracy Boulevard Suite 306 Bethesda, MD 20817 http://www.shapeup.org

RESOURCES FOR PEDESTRIAN SAFETY

National SAFE KIDS Campaign

1301 Pennsylvania Avenue, NW Washington, DC 20004-1707 Phone: (202) 662-0600 http://www.safekids.org

Safest Route to School Program

Contact local AAA Club (Ask for publications: #3201, #3212, #3213, and #3320)

US Department of Transportation, National Highway Traffic Safety Administration

National Center for Statistics and Analysis 400 Seventh Street, SW, NRD-31 Washington, DC 20590 Phone: (202) 366-4198 http://www.nhtsa.dot.gov/people/ncsa

RESOURCES FOR WORKSITE PROMOTION

American Heart Association

7272 Greenville Avenue Dallas, TX 75231 Phone: (800) AHA-USA1 http://www.americanheart.org

American Running Association

4405 East-West Highway Suite 405 Bethesda, MD 20814 Phone: (800) 776-ARFA

National Association for Public Worksite Health Promotion

http://www.americanrunning.org

The Council of State Governments 2760 Research Park Drive PO Box 11910 Lexington, KY 40587-1910 Phone: (859) 244-8000 http://www.csg.org

National Wellness Institute

PO Box 827 Stevens Point, WI 54481-0827 Phone: (715) 342-2969 http://www.nationalwellness.org

Wellness Councils of America (WELCOA)

9802 Nicholas Street Suite 315 Omaha, NE 68114 Phone: (402) 827-3590 http://www.welcoa.org

RESOURCES FOR SCHOOLS AND CHILDREN/ADOLESCENTS

Centers for Disease Control and Prevention (CDC)

National Center for Disease Control and Health Promotion Division of Adolescent and School Health Mail Stop K-32 4770 Buford Highway, NE Atlanta, GA 30341-3717 Phone: (770) 488-3168 http://www.cdc.gov/nccdphp/dash cdcinfo@cdc.gov

American Fitness Alliance

Youth Fitness Resource Center Human Kinetics 1607 Market Street Champaign, IL 61825 Phone: (800) 747-4457 http://www.americanfitness.net http://www.humankinetics.com

American Heart Association Schoolsite Programs

7272 Greenville Avenue Dallas, TX 75231 Phone: (214) 373-6300 or (800)

Phone: (214) 373-6300 or (800) AHA-USA1 http://www.americanheart.org

Bright Futures Project

NCEMCH 2000 15th Street, North Suite 701 Arlington, VA 22201-2617 Phone: (703) 524-7802 brightfutures@ncemch.org http://www.brightfutures.org

Every Child a Winner With Physical Education Program

PO Box 141 Ocilla, GA 31774 Phone: (229) 468-7098

Growing Healthy

National Center for Health Education 24 West 30th Street 10th Floor New York, NY 10001 Phone: (212) 594-8001 http://www.nche.org

KidsHealth

The Nemours Foundation http://www.kidshealth.org

Head Start

Administration for Children and Families 370 L'Enfant Promenade, SW Washington, DC 20447 http://www2.acf.dhhs.gov/programs/hsb

Center for Motor Behavior in Down Syndrome

401 Washtenaw Avenue Ann Arbor, MI 48109-2214 Phone: (734) 936-2607 http://www.umich.edu/~cmbds

National Program for Playground Safety

School for Health, Physical Education and Leisure Services WRC 205 University of Northern Iowa Cedar Falls, IA 50614-0618 Phone: (800) 554-PLAY http://www.uni.edu/playground

National Association for Sport and Physical Education

1900 Association Drive Reston, VA 20191 Phone: (703) 476-3461 http://www.aahperd.org/naspe

Physical Activity Guide for Action

Human Kinetics 1607 N. Market Street Champaign, IL 61825 Phone: (800) 747-4457 http://www.humankinetics.com

Sports, Play and Recreation for Kids (SPARK)

6363 Alvarado Court, Suite 250 San Diego State University San Diego, CA 92120 Phone: (619) 594-4815

AAWH World Health Day 2002 Move for Health

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Sources

THEME PAGE

Centers for Disease Control and Prevention, 1998. Percentage of Adults Who Reported No Leisure-Time Physical Activity [Online]. Atlanta, GA. http://www.cdc.gov/epo/mmwr/preview/mmwrhtml/00043245.htm

National Center for Chronic Disease Prevention and Health Promotion, 2001. Physical Activity [Online]. Atlanta,GA. http://www.cdc.gov/nccdphp/phyactiv.htm

Pan American Health Organization, 2002. Move for Health. Washington, DC.

U.S. Department of Health and Human Services, Public Health Service, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity. Promoting Physical Activity: A Guide to Community Action. Champaign, IL: Human Kinetics: 1999, p. 275

HEALTH AROUND THE WORLD

Centers for Disease Control and Prevention. Promoting Physical Activity: A Best Buy in Public Health. Atlanta, GA.

 $Generalities~[Online],~2000.~http://www.obesity-diet.com/anglais/gbjbc_generalities.htm$

International Obesity Task Force, 1999. Call for Action to Halt Europe's Silent Epidemic: The Milan Declaration [Online]. London, England. http://www.iotf.org/media/ecorelease991.htm

National Center for Chronic Disease Prevention and Health Promotion, 2001. Physical Activity [Online]. Atlanta, GA.

http://www.cdc.gov/nccdphp/phyactiv.htm

Pan American Health Organization, 1999. Surveillance of Risk Factors for Non-Communicable Diseases in Latin America and the Caribbean [Online]. Washington,DC. http://www.paho.org/English/HCP/Hcn/ncd_surv_tools.htm and http://www.paho.org/search/dbsreturn.asp

Pan American Health Organization. 2002. Move for Health. Washington, DC.

World Health Organization. 2001. About Physical Activity [Online]. Geneva, Switzerland. http://www.who.int/hpr/physactiv/index.htm

HEALTH IN THE UNITED STATES

Centers for Disease Control and Prevention. Morbidity and Mortality Weekly Report, 2000. Prevalence of Leisure - Times and Occupational Physical Activity Among Employed Adults - United States, 1990.(49), 420-424.[Online]. Atlanta, GA.

Centers for Disease Control and Prevention, 1998. Percentage of Adults who Reported No Leisure-Time Physical Activity by State Rank, 1998. Risks Factors and Use of Preventive Services. Atlanta,GA.

National Center for Chronic Disease Prevention and Health Promotion, 2001.Physical Activity [Online].Atlanta,GA. http://www.cdc.gov/nccdphp/phyactiv.htm

National Center for Chronic Disease Prevention and Health Promotion, 1999. Physical Activity & Health: Adults [Online]. Atlanta,GA. http://www.cdc.gov/nccdphp/sgr/adults.htm

CHILDREN AND ADOLESCENTS

Centers for Disease Control and Prevention, 1997 Adolescent and School Health: 1997 Youth Risk Behavior Surveillance System (YRBSS): Summary [Online]. Atlanta, GA.http://www.cdc.gov/nccdphp/dash/yrbs/natsum97/supa97.htm

Department of Health and Human Services and Department of Education, 2000. Promoting Better Health for Young People Through Physical Activity and Sports. Washington, DC. p 11.

Kendell, Nicole, 2000. State Activity: Physical Education [Online]. Issue Brief: Health Policy Tracking Service. Washington, DC. http://www.stateserv.hpts.org/HPTS2001/issueb2001.nsf/cd5fe07d402115ac85256f0007cb093/7424b5b03c47d3a98525688500747e44/OpenDocument

Misra, D, ed., Women's Health Data Book: A Profile of Women's Health in the United States, 3rd edition. Washington,DC: Jacobs Institute of Women's Health and The Henry J. Kaiser Family Foundation,2001.

National Center for Chronic Disease Prevention and Health Promotion, 1999. A Report from the Surgeon General: Chapter 4: The Effects of Physical Activity on Health and Disease [Online]. Atlanta, GA. http://www.cdc.gov/nccdhp/sgr/chapcon.htm

National Center for Chronic Disease Prevention and Health Promotion. 2001. Physical Activity [Online]. Atlanta,GA. http://www.cdc.gov/nccdphp/phyactiv.htm

National Center for Chronic Disease Prevention and Health Promotion, 1999. Adolescents and Young Adults [Online]. Atlanta,GA. http://www.cdc.gov/nccdphp/sgr/adoles.htm

National Center for Chronic Disease Prevention and Health Promotion, 2000. Physical Activity & Health of Young People Fact Sheet [Online]. Atlanta,GA.http://www.cdc.gov/nccdphp/dash/phactfac.htm

Operation Fit Kids [Online], 2001. San Diego, CA. http://www.operationfitkids.org

President's Council on Physical Fitness and Sports. Physical Activity: Children and Adolescents [Online], Washington, DC. http://www.fitness.gov/news/PE_fact_sheet-2.jpg

Surgeon General's Call to Action to Prevent and Decrease Obesity and Overweight,2001.http://www.surgeongeneral.gov/topics/obesity

U.S. Department of Health and Human Services and Centers for Disease Control and Prevention, 2000.School Health Index: A Self-Assessment and Planning Guide [Online]. Atlanta,GA. http://www.cdc.gov/nccdphp/dash/SHI/index.htm

U.S. Department of Health and Human Services, Public Health Service, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity. Promoting Physical Activity: A Guide to Community Action. Champaign, IL: Human Kinetics: 1999, Chapter 10, p. 202-205, 210, 278-279.

MEN AND WOMEN

Centers for Disease Control and Prevention. Promoting Physical Activity: A Best Buy in Public Health. Atlanta, GA.

Lane, Laura, 1999. Walking Reduces Women's Heart-Attack Risk [Online]. http://www.cnn.com/HEALTH/heart.9908/25/heart.exercise/index.html

National Center for Chronic Disease Prevention and Health Promotion, 2001. Physical Activity [Online]. Atlanta,GA. http://www.cdc.gov/nccdphp/phyactiv.htm

National Center for Chronic Disease Prevention and Health Promotion, 1999. Physical Activity and Health: A Report of the Surgeon General: Women [Online]. http://www.cdc.gov/nccdphp/sgr/women.htm

National Center for Chronic Disease Prevention and Health Promotion, 1999. Men and Women [Online]. Atlanta,GA. http://www.cdc.gov/nccdphp/sgr/adults.htm

National Center for Chronic Disease Prevention and Health Promotion. 1999. Women [Online]. Atlanta, GA. http://www.cdc.gov/nccdphp/sgr/women.htm

U.S. Department of Health and Human Services, January 2000. Healthy People 2010 (Conference Edition, in two volumes). Washington,DC: Chapter 22.

Sources

U.S. Department of Health and Human Services, Public Health Service, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity. Promoting Physical Activity: A Guide to Community Action Champaign, IL. Human Kinetics: 1999, p. 276.281.

OLDER ADULTS

Mc Kinney, Merritt, 2001. Staying Active Keeps Elderly Women's Minds Sharp [Online]. Medline Plus Health Information. New York. http://www.nlm.nih.gov/medlineplus/news/fullstory_2884.html

National Center for Chronic Disease Prevention and Health Promotion, 1999. Older Adults [Online]. Atlanta,GA.

http://www.cdc.gov/nccdphp/sgr/olderad.htm

National Institute on Aging, 2001. Exercise: A guide from the national Institute on Aging. Bethesda, MD. p. 3,50.

Smith,Emily, 1999. Walking As a Way of Life [Online]. University of North Carolina Highway Safety Research Center.

http://www.tfhrc.gov/safety/pedbike/articles/wayolife.htm U.S. Census Bureau, 2000. Profile of General Demographics for the

United States: 2000 [Online]

 $http://www.Census.gov/PressRelease/www/2001/tables/dp_us_2000.pdf$

U.S. Department of Health and Human Services, Public Health Service, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity. Promoting Physical Activity: A Guide to Community Action, Champaign, IL. Human Kinetics: 1999. p. 280-281

PEOPLE WITH MENTAL HEALTH ILLNESSES

Fontaine, Kevin. 2000. Physical Activity Improves Mental Health. [Online]. The Physician and Sports Medicine. 28 (10) http://www.physsportsmed.com/issues/2000/10_00/fontaine.htm

National Center for Chronic Disease Prevention and Health Promotion, 1996. A Report from the Surgeon General: Chapter 6: Understanding and Promoting Physical Activity [Online]. Atlanta,GA. http://www.cdc.gov/nccdphp/sgr/chap6.htm

National Center for Chronic Disease Prevention and Health Promotion, 1996. A Report from the Surgeon General: Executive Summary: Introduction [Online]. Atlanta,GA.

http://www.cdc.gov/nccdphp/sgr/intro.htm

Summerfield, Liane, 2000. Promoting Physical Activity and Exercise among Children [Online]. KidSource, Inc. Washington, DC. http://www.kidsource.com/kidsource/content4/promote.phyed.html

Wolf, Paul, 2001. Get Rich, Get Dates, Get Happy [Online]. San Francisco, CA. http://www.myprimetime.com/health/ailments_answers/content/mood/index.shtml

PEOPLE WITH DISABILITIES

American Association on Mental Retardation. January 2000. Achieving a Beneficial Fitness: A Program and Philosophy in Mental Retardation.

National Center for Chronic Disease Prevention and Health Promotion, 1999. Persons with Disabilities [Online]. Atlanta,GA. http://www.cdc.gov/nccdphp/sgr/disab.htm

Special Olympics, The Health Status and Needs of Individuals with Mental Retardation. Horwitz, Kerker, Owens, and Zigler.

U.S. Department of Health and Human Services, January 2000. Healthy People 2010.

MINORITIES

National Center for Chronic Disease Prevention and Health Promotion, 2000. Promoting Better Health for Young People Through Physical Activity and Sports: Strategies for Promoting Participation in Physical Activity and Sports among Young People [Online]. Atlanta,GA. http://www.cdc.gov/nccdphp/dash/presphysactrpt/strategies.htm

National Center for Health Statistics, 2001. Minority Health [Online]. Hyattsville, MD. http://www.cdc.gov/nchs/fastats/minority.htm

OBESITY

Department of Health and Human Services and Department of Education, 2000. Promoting Better Health for Young People Through Physical Activity and Sports. Washington, D.C. p.5.

Mokdad,Ali; Mary Serdula, William Dietz, Barbara Bowman, James Maks and Jeffrey Koplan,2000. The Continuing Epidemic of Obesity in the United States, Journal of American Medical Association, 284 (13): 1651

National Center for Chronic Disease Prevention and Health Promotion, 2001. Obesity Epidemic Increases Dramatically in the United States [Online].Atlanta,GA.http://www.cdc.gov/nccdphp/dnpa/obesity-epidemic.htm

National Center for Chronic Disease Prevention and Health Promotion, 2001. Obesity and Overweight - Obesity Trends [Online]. Atlanta, GA. http://www.cdc.gov/nccdphp/dnpa/obesity/trend/maps/index.htm

National Center for Chronic Disease Prevention and Health Promotion,. 2001. Prevalence of Overweight and Obesity Among Adults:United States, 1999 [Online]. Atlanta,GA.

http://www.cdc.gov/nchs/products/pubs/pubd/hestats/obese/obse99.htm

Surgeon General's Call to Action to Prevent and Decrease Obesity and Overweight,2001.http://www.surgeongeneral.gov/topics/obesity

BENEFITS

American Heart Association. 1998. Why Should I Exercise? American Heart Association Pharmaceutical Roundtable. p. 1-2

Centers for Disease Control and Prevention. Promoting Physical Activity: A Best Buy in Public Health. Atlanta, GA.

Centers for Disease Control and Prevention, 2000. Lower Direct Medical Costs Associated With Physical Activity. [Online]. Atlanta, GA. http://www.cdc.gov/nccdphp/dnpa/physicalactivity.htm

National Center for Chronic Disease Prevention and Health Promotion, 1996. Physical Activity and Health: A Report from the Surgeon General, At-A-Glance [Online]. Atlanta,GA.

http://www.cdc.gov/nccdphp/sgr/ataglan.htm

Pratt, Michael, Caroline A. Macera and Guijing Wang. 2000. "Higher Direct Medical Costs Associated With Physical Inactivity." The Physician and Sports Medicine, 28 (10): 63-70.

U.S. Department of Health and Human Services, Public Health Service, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity. Promoting Physical Activity: A Guide for Community Action. Champaign, IL: Human Kinetics: 1999, Chapter 1, p. 6,185

World Health Organization, 2001. About Physical Activity [Online]. Geneva, Switzerland. http://www.who.int/hpr/physactiv/index.htm

RECOMMENDATION AND ACTIVITIES

American Heart Association,1998. Physical Activity in Your Daily Life [Online].Dallas, TX.http://www.americanheart.org/Health/Lifestyle/Physical-Activity/DayActiv.html

National Center for Chronic Disease Prevention and Health Promotion, 1996. Physical Activity and Health: A Report from the Surgeon General, Summary [Online]. Atlanta, GA.http://www.cdc.gov/nccdphp/sgr/summ.htm or www.cdc.gov/nccdphp/sgr/ataglan.htm

National Institutes of Health, 2001. Guide to Physical Activity [Online].Bethesda,MD. http://www.nhlbi.gov/health/public/heart/obesity/lose_wt/phy_act.htm

PERCEIVED EXERTION

Keiser Corporation, 1999. Borg Scale of Perceived Exertion [Online]. Fresno, CA.http://www.keiser.com/html/borg_scale.html

U.S. Department of Health and Human Services, Public Health Service, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity, 1999. Promoting Physical Activity: A Guide to Community Action.Champaign,IL.Human Kinetics: 1999, p. 30-31.



BEHAVIOR CHANGE

National Center for Chronic Disease Prevention and Health Promotion, 2001. Target Audience [Online]. Atlanta, GA.

http://www.cdc.gov/nccdphp/dnpa/readyset/target.htm

U.S. Department of Health and Human Services, Public Health Service, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity. Promoting Physical Activity: A Guide to Community Action.Champaign,IL. Human Kinetics: 1999, p. 111-112

BARRIERS

Margolis, Dawn, July/August 1998. "Why We Don't Exercise: American Women Speak Out, The Experts Weigh In, Heroes Lead the Way." Health. 12 (5) 66-71

National Institute on Aging, 2001. Exercise: A Guide from the National Institute on Aging. Bethesda, MD. Page 10.

INDIVIDUAL CHANGE

American Heart Association, 1998. How Can Physical Activity Become a Way of Life? American Heart Association Pharmaceutical Roundtable. p. 1-2

National Institutes of Health, 2001. Guide to Behavior Change [Online]. Bethesda MD

http://www.nhlbi.gov/health/public/heart/obestiy/lose_wt/behavior.htm

U.S. Department of Health and Human Services, Public Health Service, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity. 1999. Promoting Physical Activity: A Guide to Community Action.Champaign,IL.Human Kinetics:1999, p. 78,94-98.

TARGETING AN AUDIENCE

U.S. Department of Health and Human Services, Public Health Service, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity, 1999. Promoting Physical Activity: A Guide to Community Action.Champaign,IL.Human Kinetics:1999, p. 17,50-52,65

 $Centers \ for \ Disease \ Control \ and \ Prevention, \ 2001. \ Target \ Audience \ [Online]. \ At lanta, GA.http://www.cdc.gov/nccdphp/dnpa/readyset/target.htm$

PROMOTING AWARENESS

Centers for Disease Control and Prevention, 2000. Active Community Environment [Online]. Atlanta, GA.

http://www.cdc.gov/nccdphp/dnpa/aces/htm

U.S. Department of Health and Human Services, Public Health Service, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity. 1999. Promoting Physical Activity: A Guide to Community Action. Champaign, IL. Human Kinetics: 1999, Ch. 5 pp. 87-91.

ENVIRONMENTAL CHANGE

Centers for Disease Control and Prevention, Active Community Environments. [Online]. Atlanta, GA. http://www.cdc.gov/nccdphp/dnpa/aces.htm

Centers for Disease Control and Prevention. Promoting Physical

Activity: A Best Buy in Public Health. Atlanta, GA.

National Center for Chronic Disease Prevention and Health Promotion, 2001. Physical Activity and Good Nutrition: Essential Elements to Prevent Chronic Diseases and Obesity [Online]. Atlanta, GA. http://www.cdc.gov/nccdphp/dnpa/dnpaaag.htm

National Center for Chronic Disease Prevention and Health Promotion, 1996. Physical Activity and Health: A Report from the Surgeon General, At-A-Glance. [Online]. Atlanta, GA.

http://www.cdc.gov/nccdphp/sgr/ataglan.htm

U.S. Department of Health and Human Services, Public Health Service, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity, 1999. Promoting Physical Activity: A Guide to Community Action. Champaign, IL Human Kinetics: 1999, Ch. 6 pp. 32-35, 117-120 and 129-131

CREATING A WALKABLE COMMUNITY

U.S. Department of Health and Human Services, Public Health Service, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity, 1999. Promoting Physical Activity: A Guide to Community Action.Champaign,IL.Human Kinetics:1999, p. 125-126

POLICY INTERVENTIONS

Sallis, James, Adrian Bauman, and Michael Pratt, 1998. "Environmental and Policy Intervention to Promote Physical Activity" American Journal of Preventative Medicine. 15 (4): 379-397.

MOTIVATE AND EDUCATE

American Heart Association, 1998. Physical Activity in Your Daily Life [Online].Dallas, TX.http://www.americanheart.org/Health/Lifestyle/Physical-Activity/DayActiv.html

West Virginia Department of Health and Human Resources, 1997. Physical Activity — Channels and Types of Interventions [Online]. Charleston, WV. http://www.wvdhhr.org/bph/cvd/pa-chart.htm

U.S. Department of Health and Human Services and Centers for Disease Control and Prevention, 2000.School Health Index: A Self-Assessment and Planning Guide [Online]. Atlanta,GA. http://www.cdc.gov/nccdphp/dash/SHI/index.htm

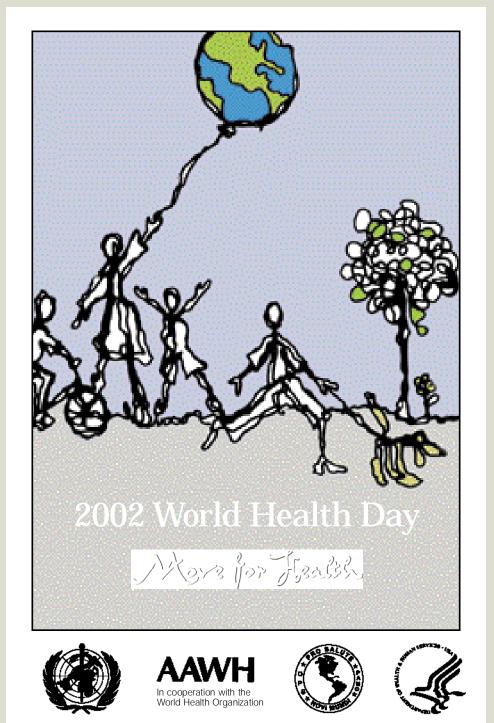
U.S. Department of Health and Human Services, Public Health Service, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activit, 1999. Promoting Physical Activity: A Guide to Community Action.Champaign,IL.Human Kinetics:1999, p. 112,125





World Health Day 2002 Event Follow-Up Report

Ná	nme		Organization	n
St	reet Address			
Ci	ty, State, Zip			
Pł	ione		Fax	E-mail
	 Please evaluate any activity, no matter how small or large. Describe the event or activity you attended, participated in or organized. Please attach copies of materials from your event (especially photographs and newspaper clippings). 			
2.	In what city was yo	our event held? In wl	hat setting?	
3.	How did you publi	cize this event?		
4.	. Is this your organization's first World Health Day event or activity? If not, did participation change from previous events or activities? Why?			vity? If not, did participation change from previous
5.	. Estimate the number of people who participated and attended. Describe the participants (adults, children, adolescents, young adults, staff members of a club/organization, etc.).			
6.	. Did you find this booklet helpful and easy to use? Please comment.			
7.	7. What was/were the most useful and least useful part(s) of this resource booklet?			
8.	8. What can we change in next year's booklet to better help you plan for World Health Day 2003?			
9.	Put an "X" in the b	lank box that best d	escribes your receipt (of the resource booklet.
,,	Its arrival was	timely	too early	
_	I grant permission to AAWH to use the description of our activity and attached Photographs in AAWH's World Health Day Report and/or in the 2003 World Health Day Resource Booklet.			
Na	ime		Title	Date
Сс	Completed forms and attachments may be forwarded to			
AMERICAN ASSOCIATION FOR WORLD HEALTH 1825 K STREET, NW, SUITE 1208 WASHINGTON, DC 20006 FAX: (202) 466-5896				



World Health Organization

Pan American Health Organization

American Association for World Health 1825 K Street, NW, Suite 1208 Washington, DC 20006 www.aawhworldhealth.org staff@aawhworldhealth.org 202 466-5883 phone 202 466-5896 fax